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A PRACTICAL GUIDE TO THE URIC-ACID-FREE DIET

FOUNDED ON EIGHTEEN YEARS' PERSONAL EXPERIENCE

BY
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PREFACE

THE subject of an ill-chosen diet and its evil effect on the community has been too long shelved by my own profession in this country: its importance has been too little insisted upon to those who depend on us for guidance.

It is not too much to say that diet, rightly understood, is the foundation of all national and individual welfare—that the rise and fall of nations is determined by the circulation in the body and in the brain. It was a saying of Napoleon that every army marched on its belly, and the same may be said of nations. In the last resort their commissariat is their success or ruin.

Dr. Haig's books have been addressed to the medical profession, and yet even under this hampering condition the vast importance of the subject commanded the interest of those who had not had a technical training. It was realized that here was an arresting statement. Every year accumulates evidence demonstrating the truth underlying this statement.

It has therefore been my endeavour to make this book as practical as possible, so as to comply with the demand for a practical guide to the Diet, now so well known and so ably set forth in Dr. Haig's books. With this object in view I have founded it largely (1) on my own personal experiences of eighteen years on the

Diet while at school, at the University, in the Army and in the profession; (2) on the experiences of those who have been Dr. Haig's and my patients for years; and (3) on questions usually asked by patients during the early months on Diet.

I gratefully acknowledge the help given me by Mrs. Hodgkinson (now Mrs. Beck), whose able criticisms and practical suggestions have been most useful and much appreciated. I am also indebted to many others of Dr. Haig's and my patients for hints about points of interest drawn from their personal experiences. My wife also has given me much valuable help in the laborious process of reading the proofs.

The assistance which my father, Dr. Haig, has given me in this book has my sincerest thanks. I can never repay him for the inestimable blessings of good health and of knowledge of these vital facts. If this book can do anything for the sole object he has at heart, the spread of truth, I may feel that I have done a little towards expressing my gratitude.

K. G. HAIG

7 Brook Street,
London, W.

HEALTH THROUGH DIET

CHAPTER I

THE URIC-ACID-FREE DIET ; WHAT IT IS

LISTS OF FOODS FORBIDDEN AND PERMITTED

THE Uric-Acid-Free Diet is so called because it is an attempt to remove from ordinary mixed diet all those foodstuffs that have been proved by actual experiment on the human body to contain uric acid or its equivalents.

In order to come directly to my subject I have omitted much scientific matter and preliminary statements which are most important and most necessary. This part, in deference to the opinion of many friends, has been placed at the end of the book in Appendix I, as it is considered to be rather too technical to place at the beginning. I must however draw special attention to the extreme importance of the matter contained in Appendix I, as it is practically the foundation-stone on which all the rest of the book is built.

I must refer, even here, to the chief fundamental principle laid down in Appendix I, namely, TAKE SUFFICIENT PROTEID. This cannot be too strongly insisted upon, whatever the diet may consist of. Proteid is *the* constituent of food that is absolutely essential for life, and is moreover the only one capable of making blood and tissue and of repairing the daily wear and tear of the body.

The best way of explaining what the Uric-Acid-Free, or Haig, Diet consists of is, to my mind, the somewhat paradoxical one of detailing what foods in the ordinary mixed diet are not permitted.

The Uric-Acid-Free Diet does not allow the following:—

All meat, meat extracts, gravies, fish, fowl and the yolk of egg.
All the pulses, *e.g.*, peas, beans, lentils, peanuts, etc., fresh or dry.
Mushrooms, asparagus, pistachio and cashew nuts.
Oatmeal, entire wheatmeal and brown bread, containing any husk.
Tea, coffee, cocoa and chocolate.

The following are doubtful:—

Watercress, generally the husks and skins of fruit and all seed coverings.

The first question that occurs to a person reading this list over for the first time is " What on earth am I to eat? " For the answer to this question I must refer to pp. 9-10 and Ch. II.

This list gives all those foods that contain uric acid or its equivalents (one of the usual terms for which is the purins, derived from the Latin pus (puris), meaning literally " the stinking thing," hence the matter from a sore) (*see* p. 190) in larger quantity than other articles of diet, the object of the Haig Diet, as shown by its name the Uric-Acid-Free Diet, being to live on those foods that contain as little of these poisonous uric-acid bodies as possible. The above list of forbidden foodstuffs has not been chosen at random or at the dictation of any particular fad, but has been the result of many years of ceaseless experiment (both on the human body and chemically), whereby first one food and then another has by the process of elimination been found by experiment, not on any one single person but on many all over the world, to contain more of the harmful uric acid than the other foods. And the food thus found wanting has been removed from the foods considered to be uric-acid-free.

There is of course no such thing as *absolute* freedom from uric acid, both for physiological reasons (*see* p. 190) and for the fact that uric acid or its equivalents (*see* p. 191) are present in nearly every food to a larger or smaller extent. All that the Uric-Acid-Free Diet aims at is *relative* freedom from uric acid by eliminating from the daily food those foodstuffs that have been proved to contain uric acid in larger quantities than the rest.

Alcohol and smoking in moderation are not forbidden, for as a general rule the taste for both will disappear after a few years on Diet (*see* also p. 78). On this account the Uric-Acid-Free Diet has been successfully used in cases of the alcohol crave.

I have often been asked by patients which of the banned articles of diet are most poisonous, and whether it would not be possible to give them in some sort of order indicating the degree of harmfulness. To comply with this is rather a difficult task, because so much depends, say in the case of tea, on the strength of the tea, in the case of chocolate, how much sugar it contains, etc. However, I will endeavour to place the forbidden foods in some sort of order, putting the most poisonous first, but it must be quite understood that I cannot guarantee the correctness of the order in which the foods are placed for the reasons given above, as well as for physiological and chemical reasons. This order can be at best but a rough guide and a rather arbitrary one at that.

The following is the order in which I would place the poisonous foods in accordance with their uric acid content, the most poisonous coming first:—

1. Tea, coffee, meat soups and extracts, sweetbread, liver, kidney.
2. The pulses.
3. Meat, fish, fowl, etc. Boiled meat or fish is less poisonous than when roast or fried, as part of the uric acid has been dissolved in the water.
4. Cocoa and chocolate, yolk of egg.
5. Mushrooms, asparagus.
6. Oatmeal, entire wheatmeal and brown bread.

I mention all these foods as being ready for consumption and not dry or uncooked as the case may be.

It must be distinctly understood that this last table is only given as a matter of convenience, and must not in any way be taken as implying that a diet including the less poisonous forbidden foods is advisable. If a person wishes to obtain the full benefit from the Uric-Acid-Free Diet the whole of the above list of foodstuffs must be strictly banned and any shilly-shallying or half measures must be avoided.

The treachery of tea lies in the fact that it makes people feel better at the moment, for it is a powerful stimulant, and therefore they think from their feelings that it must be doing them good. The insidious depression next morning or during other times of the day is not attributed to the tea at all, because taking more drives the depression away, yet the tea is the true cause of that depression, and must be taken ever stronger and stronger in order to drive the increasing depression away. Tea-drinking is just like drug-taking in fact, and has just as terrible and fatal results. For the explanation of this I must refer people to *Uric Acid*, Seventh Ed., pp. 804, 844 and elsewhere, and to *Tea as a National Beverage*, reprinted from the *National Review* of July 1906.

China tea is every bit as bad as Indian, Ceylon, or any other kind of tea from the point of view of the purin it contains. Tea only infused for a short time is just as bad as that infused for a longer time so far as the uric acid is concerned, for length of infusion only increases the amount of tannin with which uric acid has nothing in common, except in so far as they are both different kinds of poisons; but tannin is not one of the purin group, and is comparatively harmless in its effects as compared with the caffein which is so much more deadly. The caffein is so soluble that it is practically all dissolved out of the leaves immediately infusion has begun, the longer the infusion the more tannin is present. Tea from which part of the tannin has been removed is just as poisonous from the point of view of its uric acid content as ordinary tea not so treated. In fact the fuss raised about the poisonous properties of tannin is but a red herring drawn across the track with the idea of diverting the public attention from the far more poisonous properties of the caffein.

A cup of coffee may be considered equally poisonous with a cup of tea, for although weight for weight tea is more poisonous than coffee, yet the coffee in this country is usually taken stronger than tea. A cup of cocoa or chocolate is not so poisonous as a cup of tea.

It will be seen from the above list of forbidden foods that the Uric-Acid-Free Diet is much stricter than the ordinary so-called Vegetarian Diet. I wish to emphasize this point, for one so often hears it said that the Uric-Acid-Free Diet is Vegetarian Diet, a statement which I think is most misleading. The vegetarian arranges his food from the sentimental standpoint of the prevention of killing, and refuses to eat any article of food that has involved the taking of life. This in itself is a very laudable idea; but he goes no further, and this is where, in my opinion, the vegetarian makes a very grave mistake which sooner or later lands him in serious difficulties which bring discredit on himself, the Vegetarian Diet, and incidently also on the Uric-Acid-Free Diet, for it has unfortunately in the public mind been confounded with the Vegetarian Diet. The grave error that the vegetarian makes is to continue taking tea, coffee and the pulses, all of which are more poisonous than the meat he has abandoned for sentimental reasons. To attempt to convince a vegetarian of the error of his ways is a very much more difficult task than a similar effort with the meat-eater, for the vegetarian seems to be obsessed with the idea that because his diet involves no cruelty to animals, it must be perfect. When you suggest to him that his Vegetarian Diet is not all that he quite thinks it to be, he either treats your remark as a joke, or usually takes it as a personal insult. From my own experience the enthusiastic vegetarian is a difficult person to deal with, especially when you find fault with his food. This is the reason why so many vegetarians suffer from gout, rheumatism, cancer, and the whole host of uric-acid diseases, and when their diet is altered with the exclusion of tea, the pulses, etc., these troubles slowly but surely clear up.

Take the sparsely-populated parts of the United Kingdom, such as the mountainous portions of Wales and Scotland, and parts of Ireland. The people in these districts are poor and cannot as a rule afford meat more than once a week (after the weekly market day) even if as often as this. Such people are practically forced by circumstances to be vegetarians and really are so except for the one day a week when they have meat, yet they are often literally crippled with rheumatism. How can this be accounted for? Surely that one meat meal a week can hardly be held accountable for the whole of these crippled joints, seeing the active out-of-door life these people lead!! If you inquire into the matter more closely you will find that tea is the root of the evil. They take it often and strong; I have seen the huge tea-pot simmering on the hob all day long, while fresh tea is every now and then added to the noisome brew. This is where the uric acid crippling those joints is obtained from. It is very difficult to get such people to give up their tea, for it has obtained an almost unbreakable hold over them, similar to the hold that opium has over the opium-smoker, and very nearly as deadly a hold too, except that its effects are slower. Knock off the tea slowly and by degrees give it up altogether, and the joints, if not absolutely disorganized, will begin to improve, slowly but surely. The other etiological factor in these cases is exposure to cold. The increase in uric-acid diseases in the Highlands since the substitution of tea for milk has been very marked, yet the factor of exposure to cold has always been present both before the tea was begun and afterwards, so it must be the tea that has done the mischief.

I regard excessive tea-drinking among the lower classes as one of the great factors in causation of the prevalence of alcoholism, in much the same way as meat, tea, etc., amongst the upper classes are the causes of drug-taking. Tea stimulates the tea-taker at first, making him feel very fit and well, but sooner or later (since all stimulation and bracing up are wrong), the inevitable depression must follow; this is driven away either by more or ever stronger and stronger tea, or by alcohol, and so the process starts, the tea being taken more frequently and stronger with the common (and at the present day increasing) results of morphinism, chronic alcoholism and insanity, or rheumatism and its congeners. A glass of beer is very much better for a man and less harmful than a cup of tea; I do not advise either, but of the two evils take the lesser one; whisky is better than beer, which is very acid and contains some uric acid in addition. I am afraid this will hardly meet with the approval of the ardent temperance reformer, but it is none the less true. This must not be taken as in any way recommending beer or whisky as a drink, far from it. All I maintain is that tea is much more injurious than spirits or beer, and when tea is recommended as a substitute for spirits or beer, it is a case of out of the frying-pan into the fire. A few years on the Uric-Acid-Free Diet will remove the crave for both tea and alcohol.

Having at some length particularized the foods that are not allowed on the Uric-Acid-Free Diet, I will now turn to those foods in ordinary mixed diet that are permitted by the Uric-Acid-Free Diet. On being faced with the list of foods that are not allowed, the first question that occurs to the mind of the meat-eater is " What *am* I to eat? " For it seems to him that all the nourishing foods on which he has hitherto subsisted have been cut off and there is nothing left to replace them. The following table should show him to some extent that he is in error and that very efficient foodstuffs still remain, though to the meat-eater's somewhat jaded palate they may appear to be rather uninteresting and tasteless after the strong flavours of meat and its sauces; yet I can say from my own experience that the foods permitted by the Uric-Acid-Free Diet are by no means lacking in flavour. In fact foods that appear to the meat-eater to be flavourless really have an exquisite and delicate flavour of their own. Although I am rather dainty and fastidious about my food and somewhat difficult to please (in fact in my youth I kicked considerably against the Diet for this very reason), yet I can still assert that these foods will with habit bring perfect satisfaction. The apparent tastelessness of food on uric-acid-free lines is a stage that must be gone through in the process of getting rid of the poisons of the old diet before the delicious flavours of the uric-acid-free foods can be appreciated.

I have arranged the foods allowed by the Uric-Acid-Free Diet roughly into groups in accordance with their relative amount of proteid or albumen, as follows:—

A. *The most nourishing foods, i.e.*, those containing most proteid.
   Cheese, dried milk, curd, curd cheese, milk or junket (when taken by the ½ pint), white of egg, gluten and nuts.

B. *The moderately nourishing foods.*
   Biscuits, toast, bread, macaroni, rice and the cereal foods in general.

C. *Foods containing only a small amount of nourishment* (proteid).
   Fruit, vegetables, butter, cream, cream cheese, nut-butter and nut-suet.

D. *Foods containing no nourishment, i.e.*, no proteid or albumen
   Tapioca, arrowroot and cornflour (the commercial product).

In order to help people with their diet, I append some notes on each of the chief foods in the above list.

CHAPTER II

NOTES ON FOODS PERMITTED BY THE URIC-ACID-FREE DIET

THE "A" FOODS

MILK.—The proteid value of milk is 3%, or 13 grs. to the oz., which gives the ordinary half-pint glass of milk the value of 131 grs. of proteid.

Skim or separated milk is more nourishing than whole milk owing to the removal of the non-nourishing cream. This is quite at variance with the common idea that milk with its cream is more nourishing than skimmed milk; in fact I have often been told that skimmed milk contained no nourishment at all, and this by people who have been well educated in other respects! Skim milk in the country is often regarded as useless except as food for pigs; I have even heard of it being thrown away down the drains! If the poor only knew the value of skim milk, a very cheap source of proteid would be open to them, for skim or separated milk can be bought for 1d. per quart, or in some places for even ½d. a quart, so that from 524 to 1048 grs. of proteid can be obtained for 1d. according to price. Though actually more grains of proteid in the form of the pulses can be purchased for 1d., yet the proteid of the milk is so very much more easily and completely absorbed than the proteid in the pulses (the waste of proteid in the latter case being as much as from 10-40% in accordance with the method of cooking), that for all practical purposes separated milk may be taken as a cheaper source of proteid than the pulses.

Milk is best taken by itself at the end of the meal, and not at intervals during the meal; it should be taken in sips and not in great gulps, especially by those who find difficulty in digesting it, for the larger the masses of curd in the stomach the less easy is it for the digestive juices to penetrate. Milk is more easily absorbed when taken diluted with water, soda-water, etc., as the curd is not so dense, and is more friable and so more easily acted upon by the digestive juices.

Milk is 87-88% water, and so must be regarded as a bulky food, especially where limitation of fluids has to be considered.

Curd.—From the point of view of the Uric-Acid-Free Diet, curd is milk that has been curdled by rennet or lemon juice, etc., and from which the water has been removed by pressure. Curd must not be confounded with junket which is simply solidified milk containing the whole of its water. For the method of making curd see *Some Recipes for the Uric-Acid-Free Diet,* by G. M. Haig, price 6d.

The advantage of curd is that by its use one can obtain practically the whole of the nourishment of the milk without its water, an important point when fluids are limited, and also when a non-bulky diet is required. Curd is very nourishing for its bulk, for from a pint of milk about 3-4 oz. of curd are obtained, so that practically the whole of the nourishment of the bulky food milk has been condensed into the non-bulky food curd. About ¾ pint of fluid is obtained in the making of a pint of milk into curd. Of course some of the proteid is lost in the whey contained in this fluid, so that the curd made from 1 pint of milk contains 230 grs. of proteid in place of the 262 grs. in a pint of milk.

Curd has very little flavour of its own (though I personally often enjoy it quite by itself), so that it can be used with salt and the savoury part of the meal or taken with sugar with fruit, cream or puddings; it can also be flavoured with vanilla, etc.

Buttermilk (3% proteid) is just as nourishing as ordinary milk, one glassful being equal in nourishment to 1 oz. of cheese; yet it is often given to the pigs.

Dried Milk.—Dried separated milk is one of the cheapest sources of proteid, one pound costing 6d., or 373 grs. of proteid for 1d.; it may be taken as of the same proteid value as cheese, *i.e.*, 140 grs. to the oz. Two heaped tablespoonfuls of the Cow and Gate brand of dried separated milk weigh about 1 oz.; Trumilk is rather heavier, running to 1½ tablespoons to the oz.

Some dried-milk preparations are very difficult of digestion in the dry state (*i.e.* in powder form, or as biscuits, etc.), so much so that in addition to not being absorbed themselves they interfere with the absorption of the other food as well, and a person may easily be starved although taking more than enough proteid by mouth. This has been my own experience with Protene and Plasmon in the dry state except when taken during very vigorous exercise. However Protene and Plasmon when wholly in solution are well absorbed. The dried-milk preparations Cow and Gate and Trumilk are pretty well absorbed even in the dry state.

Dried milk may be taken (1) sprinkled dry over other food; (2) added to puddings and dishes in the cooking to increase their proteid value; (3) adding a tablespoonful or more to a glass of milk; (4) adding sufficient to milk or water to make a thickish cream and eating with fruit, etc.; (5) making a thick paste with milk or water and eating as such along with other food; (6) as biscuits made of 6 oz. dried separated milk (Cow and Gate brand), 2 oz. ground rice and nut oil (Mrs. Hodgkinson's recipe). These are obtainable from Shearns, Tottenham Court Road, under the name of "Ricemilk" biscuits, 65 grs. of proteid to the oz. They are very excellent eating and appear to be well absorbed.

Dried milk is of use where bulk in diet has to be considered as a large amount of proteid is contained in small bulk.

Casumen, said to be 90% proteid, is the actual albumen of the milk without the fat or milk sugar. It has been used with benefit by patients and appears to be well absorbed.

Cream and butter for all practical purposes consist of fat only, and therefore from the point of view of this book contain no nourishment. They actually do contain small amounts of proteid but, seeing the small amounts of each that are consumed in the day's food, this proteid may be neglected for all practical purposes in the daily total. Cream obtained by skimming the milk will obviously contain more milk, and is therefore more nourishing than cream obtained by the separator.

Nut-butter, nut oils and nut-suet are excellent forms of fat, and in addition contain more proteid than ordinary butter or suet, as well as being more easily digested.

Cheese.—The proteid value of 1 oz. of cheese is usually taken as 140 grs.; this is rather on the high side really, for the proteid value of cheese depends on the milk from which it is made, whether it is a skim milk cheese, a full cream milk cheese or a partial skim milk cheese. Some cheeses such as Stilton have extra cream added, so that they contain a high proportion of fat and a correspondingly smaller amount of proteid.

Cheese is one of the most important articles of food in the Uric-Acid-Free Diet, as cheese and curd are the chief foods with which to replace the meat of ordinary diet. Cheese is more nourishing than meat in the proportion that 2 oz. of cheese replace 3 oz. of meat.

The proportion of fat contained in a cheese determines its digestibility, those containing most fat being more indigestible than those containing little or no fat, for the fat tends to form a rather impermeable covering that prevents the digestive juices getting at the proteid. The chief argument advanced against cheese as a food is that it is indigestible; from the meat-eater's point of view this is so, but it does not hold for those on the Uric-Acid-Free Diet.

It is well known that the digestive juices vary their properties with the food to be digested, so that cheese will be more difficult of digestion in a case where meat is the usual food than in the case where no meat is taken and cheese is more of a staple constituent of diet. The digestive juices of a meat-eater are naturally ready to digest meat, so when a cheese meal is taken the juices are not prepared for such food which accordingly is not properly digested. It is for this reason also that the meat-eater is so often unable to digest milk. So there is no reason for a person changing his diet, who has hitherto been unable to digest milk or cheese, to say that he cannot take milk or cheese on the Uric-Acid-Free Diet because he cannot digest them. He will find that his ability to digest milk and cheese will increase as he continues with the Uric-Acid-Free Diet, so that eventually he will have no difficulty at all in this respect. For those beginning Diet who have difficulty in digesting cheese I recommend the following methods of making it more digestible:—(1) Bearing in mind that those cheeses that contain least fat are the most digestible, the first attempt should be made with Dutch (Gouda, Edam, etc.) cheese, Parmesan or some of the German cheeses made from separated milk; (2) Fresh cheese is more digestible than that that has ripened; (3) As a general rule cooked cheese is more digestible than raw cheese, though of course it must not be made leathery in the process; (4) Cheese when grated is more digestible, a piece of stale cheese is best for this purpose; (5) A better way than grating the cheese is to dissolve it. Mattieu Williams advises the use of bicarbonate of potash for this purpose as the alkali forms a soluble compound with the casein. He says that as much potassium bicarbonate as will lie on a 3d. bit is sufficient to dissolve ¼ lb. of cheese previously grated: grated cheese also dissolves easily in hot soup, etc.

With reference to the digestibility of cheese, a very interesting pamphlet was issued on 26th February 1912 by the U.S. Department of Agriculture, entitled "Cheese and its Economical Uses in the Diet," *Farmer's Bulletin*, 487, which gives many useful methods of using cheese. From the conclusion of this pamphlet I quote the following:—"Experiments have shown that when eaten either raw or carefully cooked, cheese is as thoroughly digested as other staple foods and is not likely to produce physiological disturbance."

A quotation from elsewhere in the same pamphlet on the same point is as follows:—"In the large number of experiments which were conducted, young men in good health were fed on a diet consisting of bread and fruit combined with American factory cheese, which was made with different amounts of rennet and in different stages of ripening. The results showed that over 90% of the nitrogenous material of the cheese was digested—that is, retained in the body—and nearly 90% of the energy it supplied was available. In other words, cheese compares favourably with other foods in thoroughness of digestion—that is, in the percentage finally digested. Furthermore, it did not cause constipation or other physiological disturbances."

I see this same Bulletin states that the action of potassium bicarbonate on the digestibility of cheese (mentioned above) is not that it makes the cheese more soluble, but that the potassium bicarbonate neutralizes some of the free fatty acids of the cheese, the presence of which is apt to make the cheese less easily digested. The flavour of cheese is due to these fatty acids, so the stronger flavoured a cheese is, the less digestible.

When it comes to eating 2 oz. or more of cheese at a time the question of mildness crops up, for a strong-flavoured cheese is more difficult to get down; this is met by exercising a little care in the selection. My test of a good serviceable cheese is ability to eat and enjoy an ounce of it without any bread at all. I find Gruyère, Dutch, Caerphilly, some kinds of Cheddar and fresh Wensleydale Stilton fulfil this condition.

Some cheeses contain large quantities of salt; these had best be avoided for fear of the excess of salt causing trouble.

From the point of view of the most proteid for the smallest outlay American Cheddar and Dutch come first.

People must not be led into thinking that, when they are eating cream cheese, they are consuming food of the same nourishment value as ordinary cheese. Cream cheese made solely from cream contains next to no proteid and so almost no nourishment at all. Soft fresh cheeses that are often called cream cheeses but are made from whole milk, such as the St. Ivel, Bondon, etc., are quite different; they are not so nourishing as ordinary cheese, but may be taken as about 80 grs. of proteid to the ounce.

When buying cheeses of this description it should always be ascertained whether the cheese is made of cream only or of whole milk, for it makes all the difference in proteid value as to which the cheese is made of.

Cheeses that have been doctored up in any way or that are said to contain cultures of certain bacilli are best avoided.

Eggs.—From the point of view of the Uric-Acid-Free Diet eggs consist of the white only, the yolk containing uric acid, but a few facts about eggs generally may be of use and some interest. The average hen's egg weighs about 2 oz. and of this 58% is the white, 30% the yolk and the remaining 12% shell. Thus for the practical dietetic purposes of this book we can say that the white is half the whole egg and weighs 1 oz., the proteid value of which is taken as 60-68 grs. The popular idea about the egg is that all the nourishment is in the yolk, while there is none in the white: this is absolutely erroneous, for there actually is half as much proteid again in the white as there is in the yolk. Though the percentage of proteid in the yolk is higher than the proteid percentage in the white, yet the total bulk of the yolk is only about half the total bulk of the white. So the sum total of this is that the white contains 60 grs. proteid and the yolk 40 grs. proteid.

White of egg is one of the most easily digested of all food materials. A lightly-boiled white of egg has been found to be more easily digested in the stomach than in the raw state, but the digestion of eggs takes place chiefly in the small intestine. When the question of the digestibility of cooked eggs is raised the length of time of cooking must be considered. It has been found that an egg kept at a temperature some 40° below boiling point for about 10 minutes or longer is like a very tender jelly, and is much more easy of digestion than an egg kept for five minutes in boiling water after which it is inclined to be tough and leathery. Therefore a heat below that of boiling water is the best for cooking eggs; slow cooking at a lower heat being better than quick cooking at a higher heat. A good many recipes for the cooking of white of egg will be found in *Some Recipes for the Uric-Acid-Free Diet,* by G. M. Haig, price 6d. Bale, London.

While on the subject of eggs I must just give a few words of warning against the so-called "egg" or custard powders. People are very apt to think from the names and specious advertisements of these "egg" powders that they really are eggs in powder form, whereas in reality these "egg" powders are composed chiefly of starch with a little colouring matter and next to no proteid at all! I have had several poorer patients who have bought these "egg" powders in the belief that they were obtaining genuine eggs cheaply, so this is my reason for warning people. I have no objection to these "egg" powders when used just as custard over fruit, etc., but I strongly object to their use as nourishment when their proteid content is practically nil.

Nuts.—The nutritive value of nuts is high, and, though the different varieties vary considerably in proteid value, the best way is to take them all (with the exception of chestnuts and cocoanut, which are 30 grs. to the oz.) as of the proteid value of 60-68 grs. to the oz. the same as white of egg.

Nuts as a rule are rather indigestible, so I usually advise patients not to take them to any extent until they are quite sure that they are able to digest them. Most people like nuts, so when they go on to the Uric-Acid-Free Diet they are rather apt to try and replace too much of their meat, etc., by nuts, so that they are consuming say 3-4 or more oz. of nuts a day. This may either cause actual dyspepsia, which soon shows itself, with the result that the nuts are left off, or, much more insidious, may bring on intestinal irritation with consequent non-absorption of a large proportion of the food ingested; thus urea falls, starvation ensues and sooner or later a serious breakdown supervenes unless the cause is discovered and the nuts stopped. This indigestibility of nuts is due to the large proportion of cellulose they contain as well as their richness in fat. This indigestibility can to a certain extent be overcome by putting the nuts through a nut mill and pounding them in a mortar. People taking vigorous exercise will find themselves better able to digest nuts than when they are sedentary; those whose circulation and digestion have recovered from food poisoning, *i.e.* in 2-3 years on Uric-Acid-Free Diet, will find themselves better able to digest nuts.

The most digestible nuts are pine kernels, hazels and Brazils; almonds and cocoanuts are the most indigestible.

The cracking of Brazil nuts and their extraction from the shell can be greatly facilitated by previously heating them in the oven for a short time.

Nuts are the natural food of man, yet civilization has depraved him to such an extent that he cannot live on his natural food! The Ideal Diet consists of nuts and fruit, yet scarcely a man can now be found who is able to live on it.

Nuts are almost the only food containing chloride, but the amount is quite small; still this should be kept in mind by those who say that they live on a salt-free diet.

Pea-nuts which are botanically not nuts at all but pulses, are poisonous, as, in common with the rest of the pulses they contain uric acid. Cashew and pistachio nuts which belong to a poisonous group of nuts resembling beans are not allowed on the Uric-Acid-Free Diet.

Gluten.—Gluten is the proteid extracted from wheat. As ordinarily sold it is 80% proteid or 344 grs. to the oz. This of course sounds most nutritious, but it is rather doubtful whether such concentrated foods as gluten are digested to anything like their full value. In practice I usually allow for only half the proteid being absorbed, *i.e.*, I take it actually as being a 40% food or 172 grs. to the oz. People taking gluten must be careful to see that it does not interfere with the absorption of the rest of the food. Excellent biscuits can be made with two parts gluten, one part butter with a little sugar to taste, but care must be taken that they are not made too hard for, when hard, gluten is very indigestible and moreover, like some of the dried-milk preparations, not only is not digested but interferes with the absorption of other food. It can be added to bread to increase its value (*see* Bread, p. 26) or to any other food for the same reason.

Aleuronat is a specially-prepared gluten and is said to be well digested. Glidine is a 96% pure uncoagulated wheat proteid.

THE "B" FOODS

The Cereals.—The cereals all vary slightly one from the other in proteid value, some containing rather more proteid, others rather less, but the best and easiest method is to take them all as being 34 grs. to the oz. when dry; 10 grs. per oz. cooked in water and 34 grs. to the oz. cooked with cheese or milk, the oz. for convenience in the last two cases being represented by a heaped tablespoonful. The cereals excepting rice should not as a rule be eaten with fruit, as the combination often produces flatulence.

Bread.—Bread is made from wheat flour which is the cereal in most common use. The proteid value of bread is taken as 34 grs. to the oz. Bread made at home is preferable to baker's bread for many obvious reasons, and bread made with baking powder is certainly to be preferred to that made with yeast, which is poisonous.

Bread on the whole is not a very satisfactory food, because it is very acid and on this account is apt to ferment and cause flatulence, especially when eaten with fruit, so in those inclined to flatulence the amount of bread in the day should be limited to small quantities. I have often seen flatulence disappear after cutting down bread and fluids. Bread is not only acid because of the acid salts of the wheat, but acid phosphate and calcium sulphate are often added in baking powders. This leads to retention and so bread is bad for rheumatism.

The best bread is that made from "Seconds" flour which is better than the "Best White" flour, as the latter is richest in starch while the former is richest in proteid and therefore more nourishing. A loaf made of "Seconds" is apt to be rather dark in colour and is therefore regarded with suspicion by the ignorant. "Seconds" flour more nearly approaches "Standard" flour, about which there was such a craze recently; the latter differs from ordinary flour in that it contains the germ of the wheat grain and the innermost layer of the bran which is non-poisonous and contains but little cellulose.

All wholemeal and brown bread are not permissible on the Uric-Acid-Free Diet, as the bran in them contains uric acid. Patients have often asked whether brown wholemeal flour was not more nourishing than white flour. It is literally true that there is more proteid in wholemeal flour than in white flour owing to the proteid contained in the bran, but in practice wholemeal bread is not so nourishing as white bread, because the wholemeal bread is not so easily digested as the white bread, and, in spite of the wholemeal flour containing more proteid than the white flour, actually less of the proteid is absorbed than from the white flour, because the digestibility of the proteid of the wholemeal is decreased by the presence of the bran.

This point is well shown by the following extract from Bulletin 156 of the United States Department of Agriculture, Office of Experiment Stations, p. 53.

> "In 18 digestion experiments with men it was found the white (straight grade) flour was more completely digested than either Graham or entire-wheat flour, and yielded a larger amount of digestible nutrient and available energy. While Graham and entire-wheat flours contain more total proteid and fat and have a higher heat of combustion, they actually yield to the body, because of their lower digestibility, smaller percentages of digestible nutrients and available energy than the straight grade flour."

It is owing to its indigestibility that wholemeal bread is found of use in constipation; the effect is mechanical, owing to the irritation of the hard indigestible particles on the intestinal wall stimulating peristalsis, the muscular contraction of the gut whereby the contents are pushed on.

New bread is more indigestible than stale bread owing to the extra moisture in the former preventing the digestive juices having access to the flour. Similarly biscuits, toast and especially double-baked bread, such as are used at Baylis House, are more digestible than ordinary bread, because some of the water has been evaporated and some of the starch further converted into dextrin by the heat. Because of the former reason toast, biscuits, etc., should be counted as of a higher proteid value than bread, as in fact they are, but for all practical purposes it is better and more convenient to count them as of the same proteid value as bread.

The proteid value of ordinary bread can be increased by substituting skim milk for the water in the process. Bread made with skim milk contains about 1% more proteid than bread made with water, so that 1 oz. of such skim-milk bread would contain about 40 grs. of proteid. The addition of dried milk adds still more to the proteid value of bread; adding 25% Cow and Gate separated milk to ordinary flour would give a loaf of a proteid value of about 60 grs. to the oz. The addition of gluten in the same proportion of flour also makes an excellent nutritious loaf of a proteid value of about 110 grs. to the oz. taking gluten as being 80% proteid. But seeing the note about gluten (p. 22) it would be safer to allow for only half the proteid in the gluten being absorbed, in which case bread made with gluten as above would be about 67 grs. of proteid to the oz.

Most of the American wheat preparations, such as Force, Grape Nuts, Shredded Wheat, etc., are made from whole wheat flour, and therefore are not permitted on strict diet because of the husk they contain. Bran preparations are of course still more strictly banned. Some of these brown breads made from patent germ flours, etc., appear to contain more purin than ordinary wholemeal bread.

Macaroni, spaghetti, vermicelli and similar wheat preparations are all taken as of the same proteid value as bread; they are said to be more entirely digested than bread. When cooked in water they absorb such a large quantity of water that they only average about 12 grs. of proteid to the oz. However, in this country they are usually eaten after cooking with milk or cheese, in which case one heaped tablespoonful is taken as the equivalent of 1 oz. of bread, *i.e.*, containing 34 grs.

Semolina is the large centre portion of the wheat grain and has much the same proteid value as flour; in practical use it must be regarded as of the same value as macaroni, etc., when cooked with or without milk, etc.

Maize (Indian Corn).—Maize is not used much in this country as human food, except in those useless preparations such as cornflour, etc., which contain next to no proteid, for the process of manufacture gets rid of all the proteid, leaving only the starch. What the object of ruining a valuable food in this manner is I cannot make out. One can easily obtain sufficient carbohydrate from the ordinary foods without using cornflour for the purpose.

Maize is much cheaper than wheat and should therefore be used as a food for the poor; an excellent bread can be made from it by the addition of one-third of ordinary flour, or by mixing a little gluten through the maize flour, for gluten is really the essential required in bread-making.

Maize is said to be better digested than wheat, and though maize meal is rather less nourishing than wheat meal, yet in the body the actual value is about the same. Meal made from whole maize has the same objections to it as entire wheat meal, owing to the husk, so only maize meal from which all the husk has been removed is permissible.

Maize is much used in America, where cakes are made of it, also porridge, the American "mush." Hominy is a preparation of maize that is quite nourishing. Maizena and oswego are also maize preparations, but, like cornflour, are valueless from the point of view of proteid.

Polenta, which is much used in Italy, is prepared from maize.

Rice.—Rice is one of the most important of the cereals because it is the least acid of them all, from 40-50% less acid than wheat; its proteid value however is slightly lower. The comparative alkalinity of rice is a point to remember in the diet for gout and rheumatism. It is the most completely absorbed of the cereals.

In cooking rice it should be steamed and should not be boiled in water, for most of the nutriment goes into the water and is then thrown away, while the almost useless remains are sent up to table.

Very nourishing cakes and scones can be made with rice, dried milk, and gluten, when a non-acid dietary is essential. Unpolished rice is preferable to the polished variety, as it is actually more nourishing because of the albumen in the red covering which lies immediately beneath the outer husk.

Barley.—Barley is the most acid of the cereals owing to the large amount of mineral salts it contains; it also contains more fat than the other cereals. The proteid value is much the same as wheat (34 grs. to the oz.).

" Pearl " barley is the whole grain polished after the husk has been removed. Excellent scones can be prepared from barley meal, though not so well known in this country as north of the Tweed. Barley meal was once ordered from a very well-known Stores in London, and hen food, a mixture of chaff, straw and other rubbish was sent, which an ignorant cook actually made a dish of and sent up to table!

Barley water as prepared for the sick-room contains next to no proteid, only .02%; it is of use chiefly as a diluent of milk and as a demulcent.

Rye.—Rye is very little used in this country, but is used to a large extent abroad, especially in Germany, where the so-called " black " bread is made of it. It is quite nourishing, though a little poorer in proteid than wheat. The outcry raised against " black " bread by the Free Trade section of politicians is absurd, for rye bread is practically as nourishing as wheat bread and is certainly much cheaper. The husk should of course be removed beforehand.

Sago.—Sago is simply included here for sake of convenience, as of course it is not a cereal proper. It is derived from the pith of the sago palm. It is usually eaten in this country as a milk pudding, when it may be taken as of the same proteid value as any other milk pudding, *e.g.*, rice, macaroni, etc.

Tapioca and arrowroot contain no proteid and can only be regarded as pleasant ways of taking starch, and should not therefore be taken to the exclusion of the more nourishing foods, unless with the object of filling up space after the proteid requirements have been satisfied.

Sugar.—I have often seen it stated that sugar is a very nourishing food. From the point of view of this book however (*see* p. 193) sugar is not nourishing because it contains no proteid. The administration of sugar causes a rise of urea (*see* p. 113 and *Diet and Food*, Ed. VI. p. 19). How can this be so, since there is no nitrogen in sugar? Cane sugar is a stimulant in virtue of its acidity, and all stimulants cause a rise of urea because they clear the blood of uric acid and enable the metabolism to burn up more vigorously for a period, with the resulting feeling of increased strength and well-being, both of which signify a rise of urea. This action of sugar on the uric acid in the body accounts for the commonly-accepted statement that sugar is a nourishing food. In the light of the above facts it is plainly nothing of the sort, as it is merely a stimulant and calls out the reserves of the body just as alcohol, tea, or any other stimulant does.

The gouty and rheumatic should avoid cane sugar as far as possible because of its retentive action, due to its acidity, especially when combined with fruit.

THE "C" FOODS

Vegetables and Fruits generally.—Vegetables and fruits taken generally are of very little value as sources of proteid. They are ordinarily taken as containing 2%, which is rather more than double their proteid value when cooked, except when steamed or stewed in their own juices, so I think it really would be better to take the proteid value of vegetables, with the exception of potatoes, as 4 grs. to the oz., and fruits, except bananas and the dried fruits, at the same figure. So far as my own diet is concerned I take almost no notice of vegetables and fruit as sources of proteid; use them merely as sauces to the "A" foods, and as a filling up where bulk is required; I take care of course not to break Rule II. (p. 51) about filling myself up with the "B" and "C" foods and finding myself unable to take my required quantity of "A" foods.

The water-content of vegetables when raw varies from 82.9% in greens to 95.9% in cucumber. Cooking increases the water in vegetable marrow to 99.1%. The water-content of fruit varies from 74.0% in the banana to 92.9% in the water melon. From these figures it will be evident that those who attempt to live on vegetables and fresh fruit alone are attempting a rather impossible task, unless they become like the herbivora and feed continually all day long, consuming, say 100 bananas a day in order to obtain sufficient proteid for a man of 160 lbs. Of course when it comes to the Ideal Diet of dried fruits, fresh fruits and nuts, that is quite another matter. Vegetables and fruit have a beneficial action on the bowels and are excellent preventives of constipation, owing to the large amount of indigestible cellulose they contain.

Vegetables.—From the dietetic point of view by far the most important of the vegetables is the potato, which contains 78.3% of water and 2% proteid. The best way of cooking potatoes is to bake them in their skins; in this way there is no loss owing to solution of much of the nutrient constituents in the water; in the case of the boiled potato the loss of proteid in the water amounts to at least ¼ of the whole. If potatoes are steamed instead of boiled this loss is prevented. The value of baked potatoes is increased, owing to the loss of water bringing the proteid value from 8 grs. to the oz. up to 10-12 grs. to the oz. this depending on the length of baking.

The value of the potato from the Uric-Acid-Free standpoint is that the potato is a great source of natural alkali, and so is of use as a preventive of retention due to exposure to cold (especially during the winter months), too much fruit, etc. During the winter at least ½ lb. of potatoes should be taken daily to ward off and counteract the retentive effects of the cold weather; thus ensuring that no uric acid shall be stored up with the resulting spring collaemia that is bound to follow. This is a small point, but a very important one, as even those taking no uric acid in their food may store up some of the uric acid they make in their daily metabolism (p. 191) during the cold winter months, and when the spring and early summer come will find themselves subject to minor ailments, such as colds, mental depression, etc., showing that they are not free from uric acid, and have been retaining during the winter. Avoid retention during the cold weather by plenty of warm clothing, avoid exposure to cold, take plenty of potatoes and little or no fruit in the winter, and there will be no spring collaemia at all.

Potatoes are fairly well absorbed, but they should be well masticated and not swallowed in lumps; they are in the best condition for digestion when mashed, in a *purée*, or in the mealy floury condition after baking.

Potatoes are a very cheap but very bulky diet, as a 10 st. man would require to eat 11 lbs. daily to get sufficient proteid; this bulk could be reduced considerably by thorough baking in their skins.

Yams and sweet potatoes are very similar to potatoes in composition and may be taken as of the same proteid value; they are not much used in this country.

With the exception of potatoes and the like, it is best to take all vegetables as containing next to no proteid, especially after cooking in water, so they should not be counted as contributing towards the daily proteid requirements.

Cauliflower is the most easily digested of the vegetables whose indigestibility is of use in the daily metabolism, as mentioned on p. 31.

Vegetables can usefully be employed as vehicles for introducing fat into the body; olive oil and butter used in this way (with salads, potatoes, etc.) are very beneficial in keeping the bowels regular, especially for people who are inclined to have difficulty in this respect.

Raw root vegetables pounded up are of use in cases of stubborn constipation when it is not desirable to use drugs.

Rhubarb, owing to the large amount of oxalic acid it contains, is best avoided, or anyway only taken in very small quantities; the same applies to sorrel. These two vegetables are often a cause of gravel.

Fruit.—For proteid the fruits must be divided into two classes:—(1) The fresh fruits that contain next to no proteid, with the exception of the banana, which contains rather less than 8 grs. to the oz.; and (2) the dried fruits that contain quite an appreciable amount of proteid, of these latter figs contain the most proteid, about 18 grs. to the oz., while prunes, dates, raisins, etc. about 8-10 grs. to the oz.

A point to be remembered in connection with fruit is that it is acid, and, although the general effect on the body is alkaline in the twenty-four hours, yet the effect of fruit on the metabolism is that of an acid for the first hour or so after being eaten; the result is that fruit tends to retain uric acid in the body. The reasons for this are explained in *Uric Acid*, Ed. VII. p. 682. It is for this reason that those who find that they retain easily should avoid fruit in any quantity, especially in cold weather, when they are much better without any fruit at all; this applies especially to those who have recently changed on to the Uric-Acid-Free Diet, for retention at this period means that a longer time must elapse before comparative freedom from uric acid can be attained; already this period is quite long enough without being made longer by preventable retention. And for this same reason the old adage about fruit in the morning being golden and lead at night is the exact reverse of what is really the case. The morning hours up to 12 or 1 p.m. are the time when uric acid is being passed out of the body, the so-called "alkaline tide"; fruit interferes with this natural process, and retention with its attendant troubles is caused. Therefore it is a good rule not to take fruit till after 12 noon. This applies still more to dried fruits, also to jams and marmalade which are more highly acid owing to the extra sugar they contain.

Retention by fruit in the morning one day means very likely collæmia, rising blood pressure and possibly palpitation (in weak heart cases) next morning; this rising blood pressure is one of the causes of the early morning insomnia (2-6 a.m.).

Those prone to retain easily should certainly avoid taking bread and cereal food at the same meal as fruit, so as to prevent the combined retentive action of bread and fruit.

Fruits preserved in tins should be avoided, because the acid of the fruit dissolves some of the tin, which on being taken into the body results in tin poisoning, colic and retention of uric acid.

Strawberries had better be taken in small quantities by those who are rather susceptible to the effects of fruit, *i.e.* the gouty and rheumatic, for I know of cases where strawberries have brought out rashes, etc.; this is often due to the time of life and the quantity of uric acid available (see *Uric Acid*, Ed. VII. p. 236). It has even been stated that strawberries contain some uric acid, but I have as yet been unable to discover it for myself.

The natural acidity of fruit is very much increased by eating it unripe. Therefore, any unripe fruit even when cooked had better be avoided by those who easily retain uric acid. I am referring to unripe gooseberries in particular and all unripe fruit in general.

CHAPTER III

HOW TO CHANGE DIET

TWO METHODS

HAVING definitely decided to change diet, and having been told what foods are permitted, also what his proper physiological allowance of proteid is (*see* Appendix I, p. 197), the next question that faces the beginner is, How is all this to be put into practice for everyday life, and how is one to change from the old diet on to the new diet? These are, no doubt, most difficult problems for the ordinary person to solve, and ones where the greatest number of mistakes are made. It is all very well to tell the beginner not to eat so-and-so, and that he must take care that he always gets his daily physiological allowance of proteid, but it is quite another matter for the individual thus instructed to carry out in practice all he has been told to do. With the idea of making this clearer, I propose to go into the matter in some detail. The greater portion of this part of my book has been based on answers to questions that I am repeatedly asked by those beginning diet, so I hope it may prove to be of some use to others.

I regret having to use the " grains " method in this book for it often worries people just at first. But it is very necessary in order to prevent underfeeding, and no better way has, as yet, been devised, so I have to keep to it here. To talk about cupfuls, spoonfuls, etc., is too vague and opens the door to errors which are already quite frequent enough. However with a little practice people soon get into the way of it, and the requisite quantities of proteid and the different food values, etc., become like a second A B C.

I will take as an example the case of a man of 35-40, whose net weight is 11 st., and who leads the usual business life, getting a little exercise every day and more during the week-end. His present diet on an average day is as follows, putting the approximate value in grains of proteid opposite each item:—

Breakfast.		grs. of proteid
Porridge	say 3 oz.	24
2 eggs	,, 4 ,,	240
Bacon	,, 1 ,,	60
2 pieces of toast	,, ½ ,,	17
2 cups of coffee (1 pint) with say ¼ pint of milk		65
		406
Lunch.		
Meat	say 3 oz.	300
Potato and vegetable	,, 5 ,,	40
Bread	,, 1 ,,	34
Rice pudding	,, 3 ,,	102
Fruit	,, 4 ,,	32
Cheese	,, ½ ,,	70
Biscuit	,, 1 ,,	34
Whisky and soda	,, 1 pint	—
		612

Afternoon Tea.		grs. of proteid
Bread and butter	say 2 oz. of bread	68
Cake	,, 1 ,,	34
Tea, 2-3 cups, with	,, 2 ,, of milk	26
		128

Dinner.		
Meat soup	say ½ pint	0
Fish	,, 3 oz.	180
Meat	,, 3 ,,	300
Potato and vegetable	,, 5 ,,	40
Pudding	,, 2 ,,	68
Savoury	,, 1 ,,	34
Dessert	,, 4 ,,	32
Whisky and soda	,, 1 pint	—
		654

Total proteid intake = 1800 grs. per day.

STAGE I.—This man by rule (*see* p. 198) should require 1560 grs. of proteid per day, so that he is taking 240 grs. of proteid in excess of his daily requirements. Now the first step in such a case towards the Uric-Acid-Free Diet is the elimination of the tea, coffee and meat soup. In cases where too little proteid for physiological requirements is taken, the day's food must of course be increased by the addition of uric-acid-free foods until the proper quantity of proteid is taken. The remainder of the food should be kept exactly as it was, so that this man's diet is as follows:—

Breakfast.	grs. of proteid
3 oz. porridge	24
1 egg	120
Carry forward, .	144

	grs. of proteid
Brought forward,	144
1 oz. bacon	60
½ oz. toast	17
¼ pint of milk with hot water or Postum, or flavoured with Lifebelt coffee or Horlick's Malted Milk (1 pint of fluid in all)	65
	286

Lunch.

3 oz. meat	300
5 oz. potato and vegetable	40
1 oz. bread	34
3 oz. rice pudding	102
4 oz. fruit	32
½ oz. cheese	70
1 oz. biscuit	34
1 pint whisky and soda	—
	612

Afternoon Tea.

2 oz. bread and butter	68
1 oz. cake	34
2 oz. milk with hot water or flavoured as at breakfast (1 pint of fluid in all)	26
	128

Dinner.

1 oz. fish	60
3 oz. meat	300
5 oz. potato and vegetable	40
2 oz. pudding	68
Carry forward,	468

	grs. of proteid
Brought forward,	468
1 oz. savoury	34
4 oz. dessert	32
1 pint whisky and soda	—
	534

Total proteid intake = 1560 grs. per day.

This man is now taking his proper allowance of proteid, and the only way that his diet has been made more on uric-acid-free lines is that (1) his breakfast coffee has been replaced by the milk he previously took in it flavoured by some harmless means; (2) The tea at afternoon tea has been knocked off and the milk flavoured as before; and (3) the meat soup at dinner has been omitted. Except for the fact that this man was taking 240 grs. too much proteid his diet would not otherwise have been altered; this decrease of proteid was obtained by omitting one egg at breakfast and 2 oz. of fish at dinner. This constitutes the First Stage of Diet change. The first stage should be begun at once and carried out without further alteration for about three weeks, or until he is accustomed to this change.

Stage II.—At the end of three weeks on Stage I., Stage II. should be commenced. Stage II. consists in making one meal completely uric-acid-free, keeping the rest of the food as in Stage I. Let us suppose that in this case the first meal to be made completely uric-acid-free is breakfast. Now on looking at breakfast in Stage I. we see that the articles of food that are not uric-acid-free are one egg, 1 oz. of bacon and 3 oz. of porridge. These three foods have to be replaced by uric-acid-free foods containing an equal quantity of proteid. The porridge I should replace by 3 oz. of hominy porridge, a maize preparation of the same proteid value when cooked in water; an omelette or dish made of three whites of egg will exactly replace the whole egg and the bacon. The day's food will now be as follows:—

Breakfast.	grs. of proteid
3 whites of egg . . .	180
3 oz. hominy porridge . .	24
½ oz. toast	17
¼ pint of milk flavoured as before	65
	286

Lunch, Tea and *Dinner* as in Stage I.

Stage II. should be continued for three weeks before any further change is made. If difficulty is experienced, this stage may be extended for a longer period, varying the breakfast within the limits imposed by the Uric-Acid-Free Diet. It must be quite understood that there is no necessity at all for breakfast every morning to be exactly as above. Although a great variety of ways of cooking whites of egg can be found in *Some Recipes for the Uric-Acid-Free Diet*, by G. M. Haig, price 6d., or by omitting the yolks from most whole egg recipes, still some people may get tired of eggs in any form; but countless variety can be had by reference to the *Apsley Cookery Book* (J. & A. Churchill, price 3s. 6d.), so long as the same amount of proteid is obtained from the foods substituted as is contained in the three whites of egg, for instance

1 oz. of cheese as Welsh rarebit on 1 oz. of toast would just about replace the three whites of egg, being only 6 grs. of proteid short; this could be made up by 1 oz. of potato.

Stage III.—Having accustomed oneself to one meal a day on uric-acid-free lines, the next step consists of making another meal also uric-acid-free, let us say lunch. Now lunch in Stages I. and II. contains 3 oz. of meat which will have to be replaced by uric-acid-free foods of equal proteid value. A Welsh rarebit of 2 oz. of cheese served on 1 oz. of toast will give 314 grs. of proteid which more than replaces the 300 grs. of proteid of the meat. The vegetables eaten with the Welsh rarebit must not include any peas, beans, asparagus, etc.; otherwise all the rest of the meal can remain as before. So the day's food during Stage III. will be as follows:—

Breakfast as in Stage II.

Lunch.	grs. of proteid
2 oz. cheese as Welsh rarebit	0
1 oz. toast underneath	34
5 oz. potato and vegetable	40
1 oz. bread	34
3 oz. rice pudding	102
4 oz. fruit	32
½ oz. cheese	70
1 oz. biscuit	34
1 pint whisky and soda	—
	626

Tea and *Dinner* as in Stages I. and II.

Stage III. should likewise be persevered with for three weeks, or until the beginner is quite used to the two meals of uric-acid-free foods, before proceeding to Stage IV.

Stage IV.—Stage IV. consists in making dinner uric-acid-free, for tea hardly counts as a meal and is already practically uric-acid-free, the only difference being that the cake must not contain yolk of egg. With regard to dinner, 1 oz. of fish and 3 oz. of meat have to be replaced by the uric-acid-free foods, the savoury must also be uric-acid-free and the vegetables also; in all 394 grs. of proteid have to be obtained from uric-acid-free foods. In this meal I would make the alteration by substituting one pint of milk for the whisky and soda, thus replacing the proteidless drink by one containing 262 grs. of proteid. This leaves 132 grs. of proteid still to be provided; from this we can deduct the 14 grs. of proteid that were in excess at lunch, giving us 118 grs. of proteid still to obtain from uric-acid-free sources. The curd made from ½ pint of milk will just balance this with the addition of another oz. of fruit, making 115+8 or 123 in all, being 5 grs. in excess of our requirements, which is just as well, for it is better to have the balance on the right side instead of below the required quantity.

The curd can be eaten either with the vegetables and some salt, or with the pudding and fruit. All the meals are now uric-acid-free, so I will give them in full:—

Breakfast.	grs. of proteid
3 whites of egg	180
3 oz. (3 heaped tablespoons) hominy porridge	24
½ oz. toast	17
¼ pint of milk flavoured as before (1 pint of fluid in all)	65
	286
Lunch.	
2 oz. cheese as Welsh rarebit	280
1 oz. toast underneath	34
5 oz. potato and vegetable	40
1 oz. bread	34
3 oz. (3 heaped tablespoons) rice pudding	102
4 oz. fruit	32
½ oz. cheese	70
1 oz. biscuit	34
1 pint whisky and soda	—
	626
Afternoon Tea.	
2 oz. bread and butter	68
1 oz. cake made without yolk of egg	34
2 oz. milk flavoured as before (¾ pint of fluid in all)	26
	128
Dinner.	
Curd made from ½ pint of milk	115
5 oz. potato and vegetable	40
2 oz. pudding	68
Carry forward,	223

	grs. of proteid
Brought forward,	223
5 oz. dessert	40
1 pint of milk	262
	525

Total proteid intake = 1565 grs. per day.

Though the above day's food is obtained entirely from uric-acid-free sources, I by no means regard it as a satisfactory one. I have merely given it to show how to change from Meat Diet on to the Uric-Acid-Free Diet, with as little alteration of the ordinary meat-eater's meals as possible.

My chief objections to it are:—(1) Too much fluid is being consumed during the day. The total fluid amounts to about 4 pints in the day; this is just about double what it really should be. If you ask a person taking this amount of fluid if he is *really thirsty* for all he drinks, the answer will nearly always be "No." It is largely habit, and he simply drinks because it is time to drink and he likes the flavour of the stimulant and not because there is any special thirst to satisfy. Two pints a day should be sufficient for any ordinary person's requirement, except in hot weather, or if any exertion involving perspiration has been taken, when of course more fluid is needed. In addition the fluid should not be taken during a meal, but at the end.

(2) There are too many meals. Three meals a day should be sufficient for anyone. Afternoon tea might very well be dropped out and its nourishment added on to one of the other meals, so that there will be no loss to the

sum total of proteid required for a day. If anything be taken at all at afternoon tea-time, let it be a little fruit.

(3) There is too much breadstuff, which tends to flatulence and acidity, and in addition makes the diet too bulky. Breadstuffs are not very easy to eat in any quantity unless one has a particular liking for them, so the 14½ oz. of breadstuff on the above list is too much for the average person. Breadstuff when taken at the same meal as fruit is almost sure to cause flatulence. Rice is the only breadstuff permissible with fruit for the flatulent.

These three objections of mine are the common mistakes made by the beginner. To try and prevent these mistakes being made, a diet called the " Beginner's Diet " has been arranged on purpose. " Beginner's Diet," as given in *Diet Notes*,* is as follows:—

	grs. of proteid
4 oz. white of egg on 1 oz. of toast .	306
6 oz. curd (that got from 2 pints of milk)	460
1 pint of milk	262
3 oz. of pudding (made with milk) .	102
1 oz. dried separated milk . .	130
18 oz. vegetables and fruit . .	144

Total proteid = 1404 grs. per day.

" Beginner's Diet," as here set forth, has been calculated for an active young adult, 25 years of age, whose net weight is 10 st. In order to get sufficient proteid for the man whose case I have been taking as an example, 140 grs. more proteid are required: these I would suggest getting from ½ pint of milk, 131 grs. and

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* Bale, London; 6d. for 12 copies.

1 oz. more fruit or vegetable, making 139 grs. in all. It is to be noted that the above diet contains only 4 oz. of breadstuffs, 3 oz. of which is in the form of pudding, which preferably should be made of rice, because of the comparative alkalinity of rice.

As patients appear to have some difficulty in apportioning into meals a diet as set forth above, I will proceed to do so here:—

Breakfast.	grs. of proteid
2 whites of eggs	136
3 oz. potato	24
1 oz. toast	34
½ pint of milk	131
	325
Lunch.	
1 oz. pudding	34
2 whites of egg	136
5 oz. potato and vegetable	40
Curd made from 1 pint of milk	230
3 oz. fruit	24
½ pint of milk with ½ oz. dried milk stirred into it	196
	660
Dinner.	
Curd made from 1 pint of milk	230
2 oz. pudding	68
8 oz. fruit	64
½ pint of milk with ½ oz. dried milk stirred into it	196
	558

Total proteid = 1543 grs. per day.

At first sight the above diet does not seem a very attractive one, but by varying the ways of cooking the whites of egg, varying the kind of milk pudding and flavouring the curd in different ways, quite a decent variety can be obtained: for hints in these respects see *Some Recipes for the Uric-Acid-Free Diet*, by G. M. Haig, Bale, London, price 6d., and the *Apsley Cookery Book* to be obtained of J. & A. Churchill, price 3s. 6d. net. From my own experience the above diet is by no means an uninteresting one. It is certainly the best form of diet for the beginner; he should carry on with it until he has thoroughly mastered the rules and principles that govern the selection of foods on the Uric-Acid-Free Diet and has got the proteid values of the principal foods used in the Uric-Acid-Free Diet at his fingers' ends.

. . . .

Now I will endeavour to show how a person should work out a diet for himself when he has been told that he must take a definite number of grains of proteid in the day. It often happens, owing to lack of time, that one is unable to work out a diet sheet for a patient, but can only tell him not to take less than his physiological quantity of proteid in the day, leaving the manner in which he shall obtain it for the patient himself to work out.

With this object in view and for the sake of convenience I will repeat the table, given on p. 10, of the permissible foods arranged into groups in accordance with their proteid value. In connection with the table, I will give a few essential rules which the beginner *must* obey if he wishes to avoid falling into serious errors.

> "A." *The most nourishing foods, i.e.*, those containing most proteid or albumen.
>
> Cheese, dried milk, curd, curd cheese, milk or junket (when taken by the ½ pint or more), white of egg, gluten and nuts.
>
> "B." *The moderately nourishing foods.*
>
> Biscuits, toast, bread, macaroni, rice and the cereals in general (the whole group often designated under the heading "Breadstuffs").
>
> "C." *Foods containing only a small amount of nourishment.*
>
> Fruits, vegetables, butter, cream, cream-cheese, nut-butter and nut-suet.
>
> "D." *Foods containing no nourishment, i.e.*, no proteid or albumen.
>
> Tapioca, arrowroot, cornflour (the commercial product).

RULE I.—*Each meal must consist of a definite quantity of one or more of the "A" foods as these correspond to the meat and fish of ordinary diet.*

This rule is absolutely essential and must be strictly adhered to, as non-compliance means underfeeding and starvation. In actual practice from ½ to ¾ of the total proteid for the day is obtained from the "A" foods. The object of this rule is to avoid too bulky a diet. Ordinary diet is of comparatively small bulk, so when the meat-eater changes on to the Uric-Acid-Free Diet he must obtain a diet of much the same bulk as he has been used to, for he would most likely be unable to manage a much bulkier diet and so would underfeed, and underfeeding must be avoided at all costs. Only those who are good breadstuff eaters and able to digest the bulk of such a diet without any trouble can afford to relax their observance of this rule. The average person cannot do this. If you replace your meat by cheese and your fish by white of egg, keeping your other foods as they were on meat diet, you will not go far wrong.

RULE II.—" *A* " *foods must be taken early in the meal and not left to the end.*

This is but common sense. The staple articles of ordinary diet, meat and fish, are taken during the first part of the meal: the same must be done with the " A " foods on the Uric-Acid-Free Diet. It would never do for a person to take all the non-nourishing foods first and then to find that he had no room for the essential nourishing foods, yet this is so often done by those who either are lacking in common sense or else do not think; this is merely another way of attaining to a starvation diet. The meat-eater might just as well fill himself up with bread, vegetables, puddings and other non-nourishing foods and then find that he is unable to eat his meat and fish for lack of room. I have often found patients taking the " B " and " C " foods first and leaving the " A " foods till the end of a meal, and then they come and complain that the Diet does not suit them! Of course it doesn't suit them, and never will so long as they break the fundamental rules of common-sense feeding. The one " A " food that is an exception to this rule is milk, which is best taken by itself at the end of a meal.

RULE III.—*Never attempt to replace your meat by the " B " foods.*

This rule applies with still greater force to the " C " foods. Owing to the great bulk of the " B " and " C " foods in comparison with their small amount of proteid, it is practically impossible to attempt to break this rule without incurring starvation from underfeeding. This will be obvious when I say that 3 oz. of bread or 12 oz. of potato only contain as much proteid as 1 oz. of meat.

RULE IV.—*Do not attempt to live on the " B " and " C " foods alone.*

Only those who can eat bread by the pound can break this rule. Most people cannot manage the bulk entailed by a bread and vegetable diet. Two pounds of bread only contain 1088 grs. of proteid. An active young adult, requiring 1400 grs. of proteid per day would have to take 2 lbs. of the " B " foods and 2½ lbs. of the " C " foods in order to get his proper quantity of proteid! He would require the digestive apparatus of an elephant to manage the bulk!!

RULE V.—*Learn the proteid values of the commoner foodstuffs.*

This is not nearly so difficult as at first sight might appear. It must of course be understood that these values are only approximate, and that the actual values vary both above and below the figures here stated. I have simply stated the average values. Mathematical exactitude to a grain is not required and is only waste of time. I mention this point because I have often had patients complaining that the proteid value of a food is given in one place as so-and-so and in another place as something quite different.

The chief proteid values to be kept in mind are:—

Cheese and dried milk, 130-140 grs. to the oz.
Milk, 131 grs. to the ½ pint, or 13 grs. to the fluid oz.
Curd made from ½ pint of milk, 115 grs.
White of egg and nuts, 60-68 grs. to the oz.
Bread, 34 grs. to the oz.
The cereals when cooked with milk or cheese, 34 grs. to the oz.
The cereals when cooked in water, about 9 grs. to the oz. In both of these cases the oz. is represented by a heaped tablespoonful.
Of the fruits only bananas and the dried fruits need be considered at all; they contain about 8 grs. to the oz., with the exception of dried figs, which are 18 grs. to the oz. The remainder of the fruits can be neglected so far as proteid value is concerned.
Of the vegetables, potatoes are 8 grs. to the oz. and the rest practically valueless.

If you master these few proteid values you have all you need for practical use; they soon become like a second A B C. To take into account the different values of the various kinds of nuts or cereals, etc., is to enter too much into minutiæ involving needless trouble. In this connection it is just as well for the beginner to weigh his food at first so as to tell an ounce of bread or cheese at sight. Later on when he has got into the new way of feeding and has all these rules and values at his fingers' ends, there will be no need to weigh his food, as he will then instinctively know when he has got sufficient proteid.

Now to show the best way of applying these rules, etc., in practice, I will take as an example the working out of a diet of 1400 grs. of proteid for an active adult of 10 st. net weight. Let us say that there are three meals in the day to be provided for, then obeying Rule I. the first thing is to arrange sufficient of the " A " foods for each meal to ensure that with the addition of the " B " and " C " foods the total bulk will not be more than this adult can manage. Bearing this in mind, let the " A " foods for breakfast consist of 2 whites of egg, 120 grs., and ½ pint of milk, 131 grs.; for lunch, 2 oz. of cheese, 280 grs., 2 whites of egg, 120 grs., and ½ pint of milk, 131 grs.; for dinner, the curd of 1 pint of milk, 230 grs., and ½ pint of milk, 131 grs. This gives a total of 1143 grs. of proteid from the " A " foods, leaving 257 grs. still to be obtained from the " B " and " C " foods. Personally, I should say that this was rather too much of the " A " foods, and I would omit, say 1 oz. of cheese, leaving 397 grs. of proteid to be obtained from the " B " and " C " foods; still for the sake of example I will work the diet out just as it stands.

I would complete breakfast with 1 oz. of toast, 34 grs., making breakfast now consist of:—

	grs. of proteid
2 whites of egg	120
1 oz. toast	34
½ pint of milk	131
	285

This still leaves me with 223 grs., which I would divide in equal parts between lunch and dinner, making 112 grs. each. Now of this 112 grs. for lunch, I would make 2 oz. of bread or biscuit to eat with the cheese, leaving 44 grs. to be made up from potatoes and vegetables, say 5 oz. in all, adding the remaining 4 grs. on to dinner.

Lunch would now consist of:—

	grs. of proteid
2 whites of egg	120
5 oz. potato and vegetable	40
2 oz. cheese	280
2 oz. bread or biscuit	68
½ pint of milk	131
	639

For dinner I would divide the 116 grs. up as follows:—2 oz. milk pudding of rice or barley, 68 grs., and 6 oz. of fruit, 48 grs., to eat with the curd.

So dinner would now be:—

	grs. of proteid
2 oz. milk pudding, rice or barley	68
Curd of 1 pint of milk	230
6 oz. fruit	48
½ pint of milk	131
	477

Total proteid = 1401 grs. per day.

In my own case I generally make my lunch larger than my dinner, but of course this can be varied in accordance with individual inclination. The bulk of the above diet is comparatively small; if it be found too small for satisfaction, then I would omit 1 oz. of cheese at lunch and in its place add at either lunch or dinner say 3 oz. macaroni or rice cheese, 102 grs., and 5 oz. potato and vegetable, 40 grs. Of course, once the method of procedure has been grasped, this diet can be varied in any other way that fancy dictates within the limits imposed by the Uric-Acid-Free Diet and its rules.

In Appendix II will be found a number of days' food worked out in meals for a sedentary person of 10 st. net weight and for an active person of 9 st. The object of these is to give people an idea of how to obtain variety by means of the *Apsley Cookery Book* and *Some Recipes for the Uric-Acid-Free Diet*, as well as to conform to people's likes and dislikes to some extent, showing them how to obtain sufficient proteid without curd, without milk, etc., etc.

The beginner, having mastered his proteid requirements and the method of working out his meals, must remember to make the change from the old on to the new diet gradually, taking some 2-3 months to complete the change in accordance with the scheme of Stages laid down on pp. 39-44. It is far better to do it slowly and gradually than to rush into the new diet straight away: the reasons for this are given on p. 63.

An excellent place for the beginner to go to learn about diet and the variety of the permitted foods is

Baylis House, Slough, Bucks, which is run specially on uric-acid-free lines. Baylis House is conveniently situated within half an hour of Paddington by train; a fine Christopher Wren house, standing in lovely old-world grounds.

CHAPTER IV

NOTES ON CHANGING DIET, ESPECIALLY WITH REGARD TO ERRORS

UNDERFEEDING: CHANGE SLOWLY: CHANGING A SERIOUS MATTER: SUFFICIENT SALT: EXPOSURE TO COLD: IMPORTANCE OF OILS AND FATS

MUCH the commonest error that people make on changing diet is that of underfeeding. One of the chief objects of the writing of this book is to try and prevent this, and all the rules and regulations have been laid down chiefly to prevent underfeeding. It arises mainly from the endeavour to replace the meat and fish by breadstuffs, vegetables and fruit, in fact, the breaking of Rule III. The object of dividing the permissible foods into "A," "B," "C" and "D" classes, and framing definite rules with regard to these classes, is to prevent people underfeeding.

Underfeeding is a very grave danger, and a very insidious one too to those who do not know how to recognize it: so insidious in fact is it that a person can underfeed for quite a long time (even a year or two or more if the proteid intake falls only a short way below the usual standard) without being in the very least aware of it, until the inevitable breakdown supervenes. The partial starvation, such as underfeeding entails, is much more dangerous to life than a period of absolute or acute starvation; the more dangerous because it is so insidious and creeps on people unawares. With the object of showing how underfeeding can be recognized, I will now give the usual signs and symptoms that denote underfeeding; they usually go by the name of Danger Signals:—

(1) Gradual but progressive loss of appetite, often so gradual as to be hardly noticeable at first.

(2) Slight dyspepsia, increasing slowly but surely, with disinclination for, and seemingly inability to take, food.

(3) General slackness and disinclination for work or exercise, with a crave for stimulation.

(4) Gradual onset of debility and weakness owing to the heart becoming affected.

(5) Steady loss of weight; this is the rule, yet in some cases there may even be an increase in weight, owing to the laying on of fat due to defective combustion.

(6) Temperature falls below normal, becoming more subnormal as time goes on.

(7) Progressive fall in the blood decimal, showing itself in increasing pallor of the gums, lips and eyelids (see *Uric Acid*, Ed. VII. ch. xii.).

(8) Capillary reflux becoming slower than normal (*see* prev. ref., pp. 204 and 599).

(9) Slow but progressive fall in urea (see *Uric Acid*, pp. 804 and 831; *Diet and Food*, Ed. VI. p. 69).

(10) Wrong ratio of capillary reflux to blood pressure (see *Uric Acid*, p. 204).

(11) Increasing heart weakness with beginning of neurasthenia, loss of nerve, great depression, palpitation, increasingly severe dyspepsia and debility.

I have not given these danger signals in the order in which they appear, for they usually all appear concurrently, with the exception of the last of course which come on late. No matter what the diet, on which a person lives, the above signs and symptoms will show themselves if underfeeding is indulged in.

Practically speaking, urea is the real guide to the state of a person's nutrition (see *Uric Acid*, pp. 804-831, and *Diet and Food*, loc. cit.), and in cases where there is any doubt urea should always be estimated. A 4-oz. specimen from a 24-hours' collection of the whole of the urine passed during that time should be sent to a doctor, giving amongst other details the total volume of the urine passed in the 24 hours, the weight and age of the individual, and the proteid value of the food taken during the 24 hours in question. It can then be demonstrated whether the individual is underfeeding or not. If underfeeding is suspected from the results obtained, medical advice had better be taken, for there are other causes of too low urea besides underfeeding. Paradoxical though it seems, it is possible for a person to have too low urea although he may be actually overfeeding, so far as proteid is concerned; so I will now give a list of the chief causes of too low urea:—

(1) Deficient food.
(2) Deficient absorption of food, due to:—
  (*a*) The wrong kind of food.
  (*b*) Defective circulation, owing to debility and heart weakness, setting up dyspepsia (*see* p. 170).
  (*c*) No salt (*see* p. 66).
  (*d*) Insufficient fluid.

I am here getting rather outside the scope of this book, so I do not propose to make any further comments. I only give this here because the causes of low urea are very intimately bound up with mistakes in diet. It is obvious that all the causes of low urea are *ipso facto* causes of malnutrition.

While on the subject of underfeeding I will just say a few words about Professor Chittenden's low proteid theory. In my own experience I have never yet seen a person able to live on Professor Chittenden's proteid standard without sooner or later breaking down in health. I quite grant that for 2-3 years or more a person can live on a low proteid diet with apparent benefit to health in every way, but sooner or later (it may not be even for some five or six years) the breakdown is bound to occur. I have seen a person lose his life simply from trying to live too long a period on too low a standard of proteid. I have often come across people who claim to have lived on a low proteid diet for some considerable time, but usually on examining their diet you discover that they are taking more proteid than they give themselves credit for. Practically I have not found it possible to live for any length of time on anything under the 9 grs. per lb. standard for a sedentary life, and 10 grs. per lb. for an active one, without deterioration of health. I am quite open to be convinced that I am wrong if satisfactory proof be forthcoming, but I have not as yet come across anybody who can live on the Chittenden proteid standard for 5 years without impairment of health, and I shall be very glad to hear from and see those who have done so. To be able to live a healthy life on less proteid than seems possible at present would be an excellent thing, especially from the point of view of economy, but it still remains to be proved possible.

Part of the improvement on Chittenden's diet is due to a diminished intake and so to a diminished quantity of uric acid in the body. Those who underfeed may thus at first get some slight improvement in endurance and mistake this for strength. They also lose weight and, feeling lighter, mistake this for an increase of power. But on the Uric-Acid-Free Diet they get a greater increase in endurance without any diminution of proteid or loss of power. But those who have not experienced the greater gain mistake the lesser for it (*see* also p. 114).

One point should especially be kept in mind by persons who have just changed their diet. During the first few months they must be on the lookout for squalls! People are often annoyed to find that the complaint, for which they gave up ordinary diet, is becoming worse instead of better. I always warn patients beforehand that this stage may occur, and that, when it does come, they must not be downhearted, but must take it as a favourable sign that diet will eventually cure them. This unpleasant stage is evidence that the new diet is clearing out of the body the poisons introduced by the old diet; while the process is going on patients must put up with some inconvenience in order to obtain complete cessation of their complaint later on. This stage is by no means to be ascribed to the new diet directly, but is due to the solvent action of the new diet passing the poisons of the old diet out of the body. Were it possible for the beginner to have no stores of uric acid in his body, this unpleasant stage could not take place, for it is the uric acid being passed through the tissue fluids on its way out of the body that causes the unpleasantness. One cannot expect to get rid of the evils of many years on wrong diet in the same way that one can throw away one's old clothes. Thus I hear of a patient who has gone on diet for his headaches, complaining bitterly that the new diet is making his headaches worse (the same applies even more strongly to epilepsy): but to be forewarned is to be forearmed, and this patient, knowing what to expect and the good significance of it, is cheered by the fact that this is the first sign that he is at last going to get rid of his headaches.

The disagreeableness of this stage can be very much diminished and even avoided altogether by changing diet very slowly, taking two or three months to get on to the complete Uric-Acid-Free Diet. In this way the poisons introduced by the old diet are eliminated more slowly and over a greater length of time, so that they cannot cause so much inconvenience; for the great fluctuations in excretion that cause the trouble are thereby avoided.

Another great help in this direction is the strict limitation of fluids to 1 pint, or 1½ pints at the most, in the 24 hours.

Another good rule is to change diet in the autumn, because the onset of the colder weather prevents the too quick elimination of the poisons of the old diet. It will be obvious from this last point that the worst time to change diet is in the spring and early summer, because the heat will very likely cause trouble by bringing the poisons of the old diet, in process of elimination from the body, with too great a rush into the blood.

In some cases, *e.g.*, those suffering from high blood pressure, it is absolutely unsafe to alter diet at all until the blood pressure has been reduced to safe limits by the strict limitation of fluids and two meals a day on ordinary diet as a preliminary; for changing diet without these precautions might easily end in an excessive rise of blood pressure, with consequent cerebral hæmorrhage especially in a subject of middle age (*see* p. 164).

It is by no means certain that everyone changing diet will experience discomforts during this stage; some indeed never know that they have gone through it at all, so far as their own feelings are concerned. I have gone into this matter somewhat in detail to warn people that there *may* be an uncomfortable stage during the first few months on diet, so that the blame may be assigned where it is due, and that they may not become disgusted with diet and give it up thinking that it is only making them worse instead of better.

Those who go on to a stimulating form of Uric-Acid-Free Diet or who change diet in a very bracing climate, *e.g.* Switzerland, may experience this unpleasant stage later on when they return to a less bracing climate. Those who are full of uric acid may in fact have depression, headaches, etc., at any time in the first few years after changing diet if they allow the poisons to pass out of the body too quickly.

I must warn people against the practice of being on Diet for a short time then going back again to Meat Diet for a time till they get a chill or some other minor ill, and then returning again to the Uric-Acid-Free Diet. It is far better to keep to one diet or the other and not to change about, for such a course is decidedly dangerous, especially during or after middle life, since it entails great fluctuations in the excretion of uric acid and the corresponding chances of seriously damaging the heart or other important parts of the body. It is far better to remain on Meat Diet than to change about like this. The same applies to those who are not strict about their diet, but break out on to Meat Diet when away from home or at public dinners, etc. Carry out the Diet properly, or don't do it at all!! I know of several people who have damaged their constitutions severely or even killed themselves with such folly.

If a person on Uric-Acid-Free Diet transgresses and takes food containing uric acid, he can gauge pretty well whether he is really free from uric acid by the extent to which he suffers for his transgression and the lapse of time before there are evil results. Those who are really uric-acid-free always seem to suffer out of all proportion to the transgression and after a very short lapse of time. I look upon this as quite a useful guide as to the state of a person's stores of uric acid.

A small amount of uric acid will have a much greater effect on a person who is really uric-acid-free than the same amount on a person full of uric acid, just as mud added to a wineglass of clean water shows much more than when it is added to dirty water. Similarly a dose of opium that would have no effect on an opium-eater might kill a person not habituated to the drug.

Some people run from the extreme of changing diet too quickly to the other extreme of changing too slowly. They may even remain for months and years on a diet consisting of fish or chicken once or twice a day, all their other food being uric-acid-free. Such a diet is relatively more alkaline than the ordinary mixed diet, with the result that people living in such a manner nearly always have collæmia (excess of uric acid in the blood), so that they become run down and anæmic. There is no need for this at all, so such methods of changing diet should be avoided.

A certain amount of sodium chloride (common table salt) is required by the body every day, but only a small quantity from ⅛ to ½ teaspoonful daily. The amount that people usually take is too much. Salt is required as a source of the hydrochloric acid in the gastric juice, the chloride being the essential part of the salt not the sodium. It has been observed in those who take absolutely no salt for a time that they become deficient in their power of absorbing all the food they take, so that it is quite possible for a person to be taking his full allowance of proteid and yet be really starving himself, owing to the lack of salt in his diet and the consequent non-absorption of his food (*see* p. 60). If urea (*see* p. 217) be estimated at this stage, it will be found that by no means the whole of the proteid ingested has been absorbed at all, but that apparently $\frac{1}{3}$, $\frac{1}{2}$, or even more, has not been absorbed, but has passed out of the body with the fæces. The addition of salt to the diet of such a case has at once put matters right, urea rising slowly to the proper level corresponding with the proteid intake, showing that the food has gradually all been absorbed again. No other change in the quantity or quality of the diet has been made beyond the addition of salt.

To sum up about salt:—

> Too much salt retains uric acid, and therefore
> Too much salt causes catarrh and other troubles and has to be avoided in gout, rheumatism, etc.
> Too little salt causes malnutrition, owing to deficient assimilation of food.

People must quite understand that the salts contained in vegetables, cereals, etc., are not in any way the same as common table salt (sodium chloride), which is chemically a different substance and therefore cannot be replaced by them. The chief vegetable food that actually contains chloride is nuts, and then only to a very small extent, a few grs. to the lb. The salts in vegetables and cereals are chiefly phosphates and carbonates combined with potassium, calcium, magnesium, etc. It should be remembered that salts contain no proteid, although the public usually consider them to be very nourishing.

People seem to consider that changing diet is a mere bagatelle and can be done as easily and with as little thought and trouble as changing their clothes. Diet as a rule should not be changed without medical advice, for it is a serious affair and should not be entered upon in the usual heedless and thoughtless manner. A person may not be in a fit state to change diet, although he himself may be quite unaware of it. A person has not been in good health for some little time, so he thinks he will just change his diet to see if he cannot improve his condition, little dreaming that the cause of his ill-health may be serious disease which would, under competent advice, be an absolute bar to any change of diet. In some cases diet cannot be changed at all in the uric-acid-free direction without endangering life, until after a long preliminary stage of modified ordinary diet and restricted fluids has been gone through. To change diet straight away in such cases is simply courting disaster. (*See* chapter on "Diet in Disease," p. 164.)

Changing diet in this haphazard sort of fashion usually means the committing of many errors, such as underfeeding, etc. etc. If anything goes wrong, needless to say, Diet is blamed instead of the insensate folly of such procedure.

Be very strict about exposure to cold. Carelessness in this respect will rob a person of some of the benefits to be obtained from the Uric-Acid-Free Diet. Always clothe very warmly, tending rather to overclothe than underclothe. The average person nearly always underclothes; you often find men who never wear pants even in the coldest weather; others pride themselves in never wearing an overcoat, etc. etc., and look upon ability to do so as being a sign of toughness; bathing in the open every day of the year is looked upon as a great feat, yet it is nothing more than great foolishness. It is not necessary to actually *feel* cold; the harm may be done long before this.

Exposure to cold is especially pernicious in the morning hours, so never take a cold bath in the morning, unless you are young enough and active enough to escape harm. The same applies to bathing whether in the sea, river or swimming-bath. The meat-eater cannot stand a hot bath because it makes him feel tired, slack and depressed; he takes a cold bath and believes in it because it braces him up, relieves him of that horrible morning depression and feeling of inability to do anything. The explanation of this is simple:—the hot bath brings uric acid into the blood, hence the symptoms of fatigue; the cold bath clears the uric acid out of the blood, hence the feelings of well-being and bracing up. The physiological law that the morning is the time when the largest quantity of uric acid is being passed out of the body explains why exposure to cold is especially pernicious in the morning. There is actually more uric acid in the blood (collæmia) at that time than at any other time of day, thus retention during these hours has more serious effects than at any other. This is the case whether a person is uric-acid-free or not, for as soon as retention of uric acid occurs it is obvious that freedom from uric acid no longer exists. This collæmia explains the bad temper, depression and general *malaise* of some people in the morning; it is of course more strongly marked in the meat-eater and tea-drinker, for he must have more uric acid in his blood at this time because of the food he takes. This explains why there is this great preference for a cold bath in the morning; the cold bath is taken because it relieves the depression, etc., by retention, making the bather feel brighter. The reason for this is that cold is a powerful retentive of uric acid and the clearing the blood of uric acid relieves the congested circulation and all is *couleur de rose* again. Retention unfortunately means put off, not let off, for the stored-up uric acid then waits a favourable opportunity (when the blood is in a sufficiently alkaline condition) to rush out into the blood in larger quantities than before, owing to the gradual accumulation, with more and more severe effects.

Therefore avoid most carefully all exposure to cold, especially in the morning; take a warm or hot bath, never a cold one; when you do bathe, do so after 12 noon and not earlier, unless you are young and vigorous and get actually warmer after the bath than you were before. Always clothe very warmly. Avoid being braced up, no matter how brought about; you should never get into such a state as to require bracing up. The feeling of the need for bracing up is due to the same cause as that of fatigue—excess of uric acid in the blood.

Take plenty of fat. This is a point rather overlooked by most people, because they have got the idea that fats are "bilious." Fats are only "bilious" to those on a meat and tea diet; and the biliousness is ascribed to the harmless fat instead of to its true cause, the uric acid in the tea and meat. A person, who on ordinary diet ascribes his biliousness to fat, will find, when he has been on the Uric-Acid-Free Diet for some time, that his biliousness will disappear and that he will be able to take fat *ad lib.* without any of the old evil effects.

Fats are the great source of heat in the body, therefore take more fat in winter and cold weather and less in the summer. This, I think, one almost instinctively does, for during hot weather fat is distasteful and unappetizing unless it has been put on ice. It is quite a good rule to increase the fat in very cold weather.

The best fats to take are the vegetable fats, such as the nut oils and butters, olive oil and last cream and butter. Margarine, lard and suet as a rule I do not advise. The vegetable fats appear to be better digested than the fats of animal origin, such as butter, cream, etc., so I should advise beginners, who have suffered from the so-called "fat biliousness," to begin with the nut oils and nut butters which have quite nice flavours of their own. Nut vegetable suet in fact is often used by the meat-eater in place of ordinary meat suet, because of the latter's nasty rank taste.

Care should be taken to see that the fats are eaten quite fresh, and not in any way rancid, for rancid fat is very apt to upset digestion. What is sold in this country as olive oil is more often made from cotton seed than from olives, even a brand with a good name and a high price is not above suspicion, for cotton-seed oil is cheap and olive oil dear; and so far as taste is concerned it is very hard to distinguish between the two, but cotton-seed oil has an acid rank smell when burnt, while olive oil has a nice aromatic smell.

Fat is an excellent corrective for constipation. Those who eat nuts freely will obtain plenty of oil from them; this is the best way to get a pure fat.

CHAPTER V

PERSONAL HISTORY AND EXPERIENCES

MEDICAL HISTORY: IMPROVED HEALTH AND STRENGTH: PERSONAL PREFERENCES AS TO MEALS AND FOOD

ON the assumption that an ounce of practice is worth a pound of precept, I now propose giving my own history and practical experience of eighteen years on the Uric-Acid-Free Diet, in the hope that they may be of help to others in attaining that inestimable blessing, *genuine* good health.

It is by no means a task congenial to me to use myself as an illustration. It is only at the urgent request of others that I do so at all.

I will give my medical history, as set forth in *Uric Acid in the Clinic*, which Dr. Haig has kindly permitted me to quote, and will follow this up with my own observations and experiences, with notes on my food and other matters.

My medical history is taken from pp. 25-27 of *Uric Acid in the Clinic* (J. & A. Churchill, 1910), where the author says:—

" His more important troubles began when he was in his sixteenth year at Rugby in 1894-5. He had had migraine for years, but had not up to this time been put on to a strict diet, though meat had been somewhat cut down. He had also been subject to attacks of intestinal dyspepsia with fever (often 102°) which were treated with a small dose of calomel, the temperature falling to normal in a few hours. He had occasional attacks of croup and bronchitis as a child, and whooping-cough at 12 years, but no other infectious diseases till he went to school. In July 1894 he fainted in morning chapel, and again in December 1894 he did the same after 'a run' with the other boys. After this second faint he was taken to the sanatorium, where Dr. Dukes examined the urine and found albumen; this, however, only lasted for twenty-four hours, and he was soon allowed to return to school work. This was the first time I had heard of his having albumen; I had examined his urine several times when he had headaches, but found none.

" When at home for the Christmas holidays (January 1895), he had a bad headache beginning about noon on January 13th. In this his pulse was 70; hands and feet cold; face pale and puffy; second sound of heart loud and occasionally reduplicated. He looked, now and then, as if he might faint. He sat in front of the fire and took a little sp. ammon. aromat. Headache passed off about 4 p.m. Urine of the night of 12th (before headache) contained no albumen. Urine passed during headache, milky with urates, sp. gr. 1030, acidity 7.2 cc. of decinormal soda solution, urea 3 per cent., uric acid .18816 per cent. Relation, uric acid to urea 1 to 16, a large excess. Albumen present (a distinct trace with acetic acid and boiling). Urine passed 8.45 p.m. of the same day, 1024, acid, no albumen.

"On January 16th I examined his blood and found hæmoglobin 79 per cent., cells 93 per cent., making the blood decimal 0.85.

"At this time Dr. (now Sir) Lauder Brunton kindly saw him and suggested that he should be kept at home for observation during the Lent term (which was done), and agreed that he could not do better than try the Uric-Acid-Free Diet. Sir Lauder was inclined to take a somewhat serious view of the matter, as he had seen other schoolboys presenting similar signs, whose cases had developed into severe dyspepsia with heart weakness and Bright's disease; such troubles being, as we shall see, in the direct line of progressive and uncured collæmia.

"He was then put on the Uric-Acid-Free Diet in so far as it had at that time evolved from my researches, but including some pulses, mushrooms, asparagus, etc., which were not known to be harmful till later on.

"Weight before breakfast in clothes 8 st. 12 lbs. 6 oz.

"He went on well, steadily gaining weight, and in April 1895 he weighed 9 st. 6 lbs. 2 oz., and his blood showed hæmoglobin 84 per cent., cells 98 per cent., B.D. 0.85 (*i.e.* the same as before; if he had been doing badly on Diet it would have fallen off). He had only three headaches during February, March and April, and further gained weight, being 9 st. 10 lbs. 4 oz. on May 3rd. In the summer term at Rugby he unfortunately got scarlet fever, but at my request was kept on a diet of milk only; he did well, and had no albuminuria or other complications. The rest of the record is one of steady improvement. There was one slight headache in August 1895; in September the weight was 9 st. 11 lbs. 8 oz. Up to this time he had had occasional egg and fish, but now gave them up entirely.

"In the autumn term he was allowed to play football and to go for runs if he felt inclined to do so, and he did both without any ill effects. He slept better on the new diet and had no headaches all this term.

"Weight continued to increase steadily, and in September 1896 was 10 st. 6 lbs. 8 ozs. Has practically no troubles now. There were two slight headaches during the holidays, due to (1) getting wet and cold, and (2) occasional mushrooms.

"The rest of the history is one of further improvement with only occasional and quite slight headaches, never accompanied by albuminuria; and the improvement increased, especially as pulses, mushrooms, and asparagus were gradually found to be harmful and eliminated from his diet. The urine was examined in March 1897, and was found to give sp. gr. 1022, and to be free from albumen. The B.D. also steadily improved, rising gradually throughout the ensuing two or three years to 0.9, then to 1.0, and even to 1.1, which is rather above the normal standards, so that I had the colour of his gums copied by an artist and used it as the highest colour on my colour card, corresponding to the decimal 1.1 (*see* explanation of these figures in *Uric Acid*, p. 538).

"Apart from the absence of headache, faintness, and albuminuria, the most marked improvement was that in endurance; for in a few years the boy who had fainted at school became a young man who could ride a heavy (35 lb.) bicycle with heavy luggage 185 miles in eighteen hours (*i.e.* from North Wales to London), and often did greater distances (*e.g.* 263 miles in thirty hours in 1903, half of which was against the wind).

" Practically this condition of things has continued, and he has now (1910) been upwards of fifteen years on diet. At Oxford, and subsequently in the army, he astonished many by the strength and endurance he displayed. At Oxford he won several college rowing prizes, and would, I believe, have been in one of the college boats, but that it was feared that his diet would demoralize that of the rest of the crew."

In the ordinary sense of the word I was considered to be an average healthy child (though I now see that I was nothing of the sort, judging by uric-acid-free standards), until albumen was discovered in my urine. Yet all I had suffered from, on the surface, were headaches, bilious attacks, colds, etc. etc., all, one might say, the *sine qua non* of modern good health.

I did not go on to diet of my own free will; far from it, for I was very fond of meat and used to eat a quantity of it, but Sir T. Lauder Brunton, I remember, showed me pretty clearly that Diet was practically my only chance of ever being able to do anything. So I had to give way, though I cannot say that I believed Sir Lauder then, and only thought he was trying to frighten me. My greater knowledge now shows me how very near the truth he was, for I have seen more than a few cases with histories very similar to my own who have now the well-marked signs and symptoms of long-standing Bright's disease. Anyway, the gradual improvement in my health after giving up meat, etc., and the fact of the permanence of the improvement, has never given me cause to regret my change of diet. The attainment of *genuine* good health, not the modern hollow sham, is well worth any sacrifice. I have to thank Sir T. Lauder Brunton for thus opening my eyes to the facts, for one naturally takes a warning from a comparative stranger as much more serious than the same warning from one's own people, especially when one is still a child.

Since being on Diet I have had only one serious illness, namely typhoid fever when I was in Egypt in 1901-02; I recovered from this very well, and have been none the worse for it, as shown by the fact that I have done most of my long-distance riding since.

I stand just over six feet in my stockinged feet, and my normal weight stripped varies from 10 st. 10 lbs. to 11 st. and over, in accordance with my condition of training or otherwise. My general healthy appearance has been the means of inducing others to adopt the Diet in the hope of doing likewise.

I do not smoke. I used to smoke at Oxford to the extent of 4-5 pipes or more a day, and enjoyed it too; I used to say it cleared my head. But Diet in those days was not so perfect as it is now, so there was more call for stimulation. As Diet became more uric-acid-free I gradually lost all taste for smoking and gave up altogether, for smoking is simply a form of stimulation. This last fact explains the great increase in smoking, in common with all other forms of stimulation, at the present day. The increase of amiability and the relief from depression as the result of smoking is very marked in many meat-eaters.

I am not a teetotaller, but I do not like alcohol in any form and only take it very occasionally to keep a friend company. The loss of taste for alcohol after being on Diet for some time has often been remarked on by those who liked alcohol before changing their diet. But the absence of uric acid from their food has decreased the call for stimulant, and so they have gradually, almost imperceptibly, left it off. This same reason explains the loss of pleasure in smoking after being on Diet some time.

With regard to my own personal experiences in strength and power of endurance, I do not wish in any way to appear boastful, for I regard myself as being fairly average in these respects. But what I wish to emphasize is the fact that I was a weakly child with all the signs and symptoms of Bright's disease in its early stages, my heart was dilated, I fainted several times, and I was always cursed with " minor ailments " of one kind or another, yet in view of all these constitutional handicaps in early life that I should be able later on to develop such powers of endurance, as I now have, speaks volumes for the good Diet has done me. That my heart after such unfavourable beginnings should have been so improved by Diet as to enable me to do over 260 miles on a bicycle at a stretch in 30 hours is a pretty good testimony of the benefits Diet has conferred on me. But I do not imply that 260 miles is anything much in itself as a test of endurance for one who had been blessed with a stronger constitution to begin with. I have often exceeded the 200 miles at a stretch and think nothing of doing 100 miles without any previous training. Forty miles is my present record for walking, and then I could have gone much farther but for getting footsore. I have never reached the absolute limit of my endurance, though I have often tried to do so on a bicycle. Stiffness after severe exercise is unknown. When I took up boxing it used to be remarked what a good "wind" I had, better than my instructor, a young army sergeant.

While on the subject of personal experiences, I may as well mention other benefits that I have obtained from Diet, many of them but little things. Still it is the "little things" that count in life. My sleep has improved very much on Diet. I did not suffer from insomnia before, but I often used to wake in the small hours of the morning, the cause, as I now know, being high blood pressure. This has quite disappeared and has been exchanged for ability to go to sleep as soon as my head touches the pillow; my wife has often remarked how very quickly I seem to go to sleep. Another small point is that my skin heals up after cuts, abrasions, etc., so very much quicker than it used to. On Meat Diet I was rather a sluggish healer and often experienced suppuration from unhealed cuts becoming infected; this kind of trouble has now quite disappeared, showing how the skin circulation has improved. The importance of this last point for those who have to undergo surgical operations is of course very great. Surgeons have noticed, when anyone on Uric-Acid-Free Diet has been operated on, how very much quicker and cleaner the wound has healed than in the case of the usual patient.

Another small point is, that since I have been on Diet I have not been bothered by the unwelcome attentions of the flea, the midge, the mosquito and others of the kind. While on Meat Diet I was continually being bitten all over, but now I hardly suffer at all in this way, unless it be from a more than usually virulent specimen, but even so the bites are few in number instead of scores as they would have been in old days. Whether it is that I am bitten and that the bites do not seem to have any effect on me, or whether I am actually not bitten at all, I cannot say for certain, but I am rather inclined to think it is the former. I noticed this comparative immunity to the bites of insects more particularly when I have been in Egypt, where my friends seemed to suffer much more in this respect than I did, for when they had masses of bites I had scarcely any.

This is common experience amongst those on the Uric-Acid-Free Diet (see *Uric Acid*, pp. 492-4 and 632), and explains part of the immunity of those on Diet from malaria without quinine or mosquito nets, the other part being due to the fact that the worst complications of malaria are the results of uric acid in the blood.

Constipation is another of the " minor ailments " that I am thankful to say the Uric-Acid-Free Diet has completely freed me from, for on the ordinary diet I was in constant trouble with my bowels, often missing a day or two, with almost incessant straining at stool with all its attendant miseries.

My temper certainly has been improved by being on Uric-Acid-Free Diet. This improvement in temper has been noticed in many other cases. It is a small point, of more importance to one's friends perhaps than to oneself! The meat-eater's temper is always worse in the morning because of the excess of uric acid in the blood; so many are "not nice before 12!" and breakfast is notorious as the most unsociable meal of the day.

Getting out of bed in the morning has no terrors for me and I find the morning the best time for work, rather the reverse of my experiences when on ordinary diet, when inability to concentrate one's mind seemed to be the chief trouble.

As my own experience of upwards of 18 years on the Uric-Acid-Free Diet is such an utter refutation of a criticism advanced against the "purin-free" diet by Dr. Robert Hutchison, I will refer to the matter here as well as in the chapter "Replies to Some Common Queries and Criticisms." Dr. Hutchison says on p. 552 of the third edition of his *Food and Dietetics* :—

> "It is not often advisable to continue the purin-free diet for long in its strict form, as otherwise digestive troubles and impairment of the general health are apt to result."

From my own personal experience I can say that there is no foundation whatever for the above statement. Surely 18 years should be long enough for any "digestive troubles and impairment of the general health" to show themselves, if they ever mean to. I have never met with or heard of a patient on the Uric-Acid-Free Diet suffering in this manner unless he has been breaking one or more of the essential rules of Diet. Of course if people will do things in the wrong way, one cannot be surprised at any trouble, such as is mentioned above. According to the above, the stricter the Diet is the more likelihood there is of these troubles happening, yet my health is above the average and my digestion could hardly be better, although I have always been very strict about keeping to the Diet closely, for the closer I follow Diet the better my health is; apparently the very reverse of Dr. Hutchison's experience. After all, the Uric-Acid-Free Diet has rescued me from the clutches of Bright's disease, a fact I did not realize at the time, though I fully realized it when I had some knowledge of medicine. I changed my diet in the days of my boyhood, when of course I was ignorant of physiology and pathology. The more I learn of these sciences the more I marvel at what the Uric-Acid-Free Diet has done for me. I have gone through the ordinary routine of medical education, and have seen the treatment adopted for certain conditions in ordinary conventional practice; I have been able to compare the conventional treatment with that of Dr. Haig for the same condition, to the infinite advantage of the latter. Many obscure points, whose pathology and treatment alike seemed to me to be inexplicable, have been explained in quite another manner by the uric-acid theories. What is more, these theories have been borne out and confirmed in practice.

I live on two meals a day for several reasons: (1) I find that I am fitter, my appetite is better and my food better absorbed. I always felt very fit on the Uric-Acid-Free Diet with three meals a day, but with two meals I feel even fitter, although it is rather like gilding refined gold. My appetite is certainly keener and I enjoy my food more than on three meals a day, for breakfast always seems to take the edge off my appetite for lunch. (2) It is very convenient and saves time. (3) On two meals a day I find that I can, if need be, last much longer without food without feeling in the least weak or frantically hungry. As an instance of this, I was at the last Motor Show at Olympia just after 10 a.m., and I was so interested in the exhibits that I never noticed the passage of time till I overheard someone saying it was just 5 p.m.; even then I did not bother about food, but went on till the Show closed at 10 p.m. I had no food at all that day till nearly 11 p.m.; at 5 p.m. when I thought about it I was hungry, but there was no overpowering desire for food and no feeling of emptiness or weakness, for my interest in the Show soon drove all thought of food out of my mind. It is very convenient to be able to do this, and I have often made use of it when the necessity arose. It seems to astonish most people that I can go without food for so long and yet be able to carry on as usual. It is most useful to know that one can do this without any trouble, and I attribute the ability to do so entirely to the Uric-Acid-Free Diet and to two meals a day. I ordinarily take my meals at 1 p.m. and 8 p.m. People often wonder how I manage to last from dinner the night before till 1 or even 1.30 p.m. next day. They say if they were to try such a thing that they would feel slack, empty and unable to do anything; yet so far from this being so in my case I often, when in the country, have done over 60 miles on a bicycle in the morning, and come in for my first meal of the day about 1.30 p.m. feeling much as usual except that my appetite is rather keener. Starting out in the morning on a ride of 150 miles or more, I always prefer to start without food and ride till I get a keen appetite before taking food, for I travel faster, go further and with less fatigue than if I start an hour or more after a meal. When starting out for an all-day trip by motor or by any means that does not entail much exertion, I always take my first meal in the morning before I start; in this way I save the time spent over lunch and so get further in the same time by continuing straight on.

My typical day's food is as follows:—

First meal at 1.30 *p.m.*	grs. of albumen
4 whites of egg	240
6 oz. potato and vegetable	48
1½ oz. cheese	210
2 oz. bread	68
Curd from 1 pint of milk	230
3 oz. fruit	24
Carry forward,	820

	grs. of albumen
Brought forward,	820
½ pint of milk	131
	951
Second meal at 8 p.m.	
4 oz. of some cereal dish made with cheese or milk	136
6 oz. potato and vegetable	48
Curd from 1 pint of milk	230
3 oz. fruit	24
½ pint of milk	131
	569

Daily total—1520 grs. of albumen.

I have not made any allowance in the above tables for vegetables, other than potatoes, or for fruit, other than bananas and dried fruit, as I do not regard their proteid value as worth considering (*see* p. 30). Of these more or less valueless (from the proteid point of view) vegetables and fruits I consume a pound or more during the day. Butter I am very fond of and eat it largely at both meals.

Taking my weight as 11 st. I require by Rule (*see* p. 196) 1540 grs. of albumen every day, so that, including everything that I eat, I am feeding well up to the required mark.

It should be noted that 1172 grs. of my proteid is obtained from the " A " foods (*see* Rule I., p. 50). I conform with Rule II. (*see* p. 51) by commencing my first meal with the cheese, following it with the white of egg, always taking care that I have eaten all the " A " foods before I let myself go to any extent on the fruit and vegetables. The milk I always take at the very end of the meal. I also take very little bread.

I by no means regard the hours for my meals as the correct ones, for it is only the exigencies of my work that compel me to have my meals at these hours—12 noon and 7 p.m. would be much better.

CHAPTER VI

REPLIES TO SOME COMMON QUESTIONS AND CRITICISMS

PREVENTION BETTER THAN CURE: SOME IMPORTANT STATISTICS: WHAT IS GOOD HEALTH: STRENGTH WITHOUT MEAT: REPLIES TO COMMENTS

"NEED I change my diet if I am perfectly healthy on my present diet?"

This is a question that one is often asked, more especially by those who still have youth and apparent health on their side.

This question is best answered in two parts:—

(1) Prevention is better than cure.
(2) Is the perfection of your health beyond all question? A searching inquiry usually casts some doubt on the subject.

I will now proceed to explain the significance of (1).

With this object I will give a few figures from the 73rd Annual Report of the Registrar-General for the year 1910, which is the last published at the time of writing. These figures show that (1) a large number of the deaths are due to diseases which are prevented by the Uric-Acid-Free Diet; (2) many of these same diseases, with but very few exceptions, are slowly but surely increasing their respective death-rates. I do not wish to lay any special stress on the figures themselves; I regard them merely as straws showing which way the wind is blowing.

The figures taken for purposes of comparison are those given for the years 1901 and 1910. First I will give the general birth and death rates for the two years in question. I give these in the form of the rates per million, instead of the more usual rates per thousand, simply for the purpose of making the comparison easier between these figures and the figures I give a little further on, which are on the per million basis.

	1901	1910
General birth-rate per million living	28,500	25,100
General death-rate per million living	16,900	13,500

Decrease in the birth-rate during these ten years is 3,400 per million living.

Decrease in the death-rate during these ten years is 3,400 per million living.

Hence the decrease in the death-rate is practically exactly balanced by the decrease in the birth-rate. But, as a matter of fact, the birth and death rates are rising and falling more or less together all over the world, so it is no isolated fact that this same process should be going on here. If we here take the credit for a falling death-rate which is accompanied by a falling birth-rate, are the Canadians in Ontario to take credit for a rising birth-rate accompanied by a rising death-rate? We and the Canadians cannot claim credit for exactly opposite conditions. Medicine, hygiene and sanitation have made advances all over the world, but logically they cannot take the credit for the fall in the death-rate here as well as for the rise in the birth-rate in Ontario, taking into consideration the other respective conditions. A rising birth-rate must be discounted by a rising death-rate, so also should a falling death-rate be discounted by a falling birth-rate. Taking this into consideration, it seems in this country as though the advance in the scientific treatment of disease generally together with the better hygiene and improved sanitation, to which so much credit for the falling death-rate has been ascribed, have had little or no effect on the general death-rate. Surely a grave state of affairs! This, of course, does not mean that medical science has made no progress at all in the treatment of every disease, but that the great advance that has been made in the treatment of certain diseases (*e.g.* tuberculosis, the death-rate of which per million living in 1901 was 1807, whereas in 1910 the rate had been reduced to 1434) practically has been balanced by the increase in the death-rate due among others to the diseases caused by food poisoning. This fact has been overlooked, owing to it being concealed by the falling death-rate, which naturally at first sight would be attributed to the advances in medicine, hygiene and sanitation. It is only on looking into the matter more closely that it is discovered that the falling death-rate is discounted very largely by the falling birth-rate.

The group of diseases caused by food poisoning (in other words, uric acid) has received at the hands of the profession no generally-accepted treatment that really goes to the root of matters. All that has been done consists of the tentative treatment of symptoms, a method that cannot produce permanent improvement, seeing that the cause remains untreated. Therefore the death-rate due to the food-poison group is either unaffected or else slowly increases because the cause remains untreated.

In order to demonstrate that the death-rates due to some of the diseases that are caused by uric acid are increasing on the average, I give a table showing the death-rate per million living due to some of the diseases that are caused mainly by errors in feeding. In this table I give the death-rates for the year 1891, as well as those for the years 1901 and 1910, so that, in cases where there might be doubt as to whether the death-rate was falling or rising, the figures for 1891 might serve as an indication.

Death-rate per million living due to:	1891	1901	1910	
Broncho-Pneumonia	—	460	490	(inc.)
Cancer	692	842	967	,,
Anæmia	54	59	68	,,
Diabetes	66	91	110	,,
Heart disease due to rheumatism	341	403	480	,,
Apoplexy	908	734	706	(dec.)
Bright's disease	353	390	389	(inc.)
Suicide	85	96	100	,,

Prior to the year 1901, broncho-pneumonia was not differentiated from pneumonia, so its death-rate in 1891 cannot be given.

Those who would argue that the diet factor has little or nothing to do with the causation of the above diseases, I must refer to Dr. Alexander Haig's standard work, *Uric Acid as a Factor in the Causation of Disease*, 7th Ed., J. & A. Churchill. A fact that is not without significance is the close connection that the incidence of cancer bears to wealth and the resultant high rate of living combined with excessive tea and stimulant-taking. The richest parishes in London have the highest cancer death-rates. Similarly those towns with the largest proportion of the well-to-do classes have a higher cancer death-rate than the towns with a poorer population. Oxford and Cambridge possess an unenviable record in this respect. It cannot be denied that in countries where the consumption of meat, tea and beer is small, there the cancer death-rate will be found to be low also. Further information on this most interesting subject will be found in the Hon. Rollo Russell's most instructive book, *Preventable Cancer*, Longmans, Green & Co., also in an article on the " Relation of Cancer to Gout and Rheumatism," by Dr. Alexander Haig in the *National Review* for January 1912 (since reprinted and obtainable from Bale, London).

To enter into the pathology of cancer and of the diseases mentioned above, or to discuss the various theories and arguments, is outside the scope of this book.

On looking at the above eight diseases in the light thrown on them by Table 42, p. 90 of the Registrar-General's Report, I find that one quarter of the total death-rate per million (from all causes) was due to these eight diseases.

As a matter of some interest for comparison with the statistics given above, I append some figures showing the consumption of the chief poisonous foodstuffs per head of the population, taken from the Statistical Abstract for the United Kingdom.

	1882	1891	1901	1911
Meat, lbs.	14.18	27.24	58.8	55.65
Tea ,,	4.69	5.36	6.16	6.48
Coffee* Cocoa Chocolate } lbs.	1.23	1.33	1.96	2.22

I am glad to see that the consumption of meat is inclined to fall of late years, but unfortunately the increase in tea alone more than balances it, so far as uric acid is concerned. For while meat contains 8 grs. of uric acid to the pound, tea contains 175 grs. of uric acid to the pound; roughly, a cup of tea contains as much as 2½ oz. of meat (*Uric Acid,* 7th Ed., p. 796). Thus the diminished consumption of meat means 25 grs. less uric acid, but the increase in tea accounts for an extra 56 grs. of uric acid.

In his introduction to the Annual Report for 1910, the Registrar-General says: " The aggregate death-rate from cancer reached its highest point in 1910, but it is worthy of remark that this increase was confined to the mortality of males, the death-rate of females having shown a slight decline." With reference to this observation, it is a well-known fact that of late years men have taken too kindly to afternoon tea and consume more tea and coffee than they used to a few years ago. It is a somewhat significant fact that the increase of tea-drinking among men should be accompanied by an increase of cancer.

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* Taking coffee separately, there has been a fall since 1882.

Taking into consideration the facts and figures discussed above, together with the fact that uric acid is the partial, if not the entire, cause of many other diseases as well, it can be said in truth that " Prevention is better than cure "; and the sooner prevention is taken in hand the better. There is a crying and urgent need for it.

I will now proceed to the consideration of the second part of my reply to the question, " Need I change my diet if I am perfectly healthy on my present diet? "

To those who consider that they are perfectly healthy on ordinary diet, and there is therefore no need for them to change their diet, I would reply that they do not really know what *genuine good health* is. The modern standard of health is at best but a low one. On cross-examining one of these self-styled " perfectly healthy " persons you will discover, that is if he be truthful, that such minor (to his idea) ailments as constipation, headaches, colds, dyspepsia, biliousness, etc., in no way detract from the flawlessness of his perfect health. How could the army of patent-medicine venders flourish, were not the public demanding some nostrum or other in a vain endeavour to improve their health. The huge increase of patent medicines has been synchronous with the deterioration of health and the increase of disease. Ask a woman a somewhat similar question about her vaunted good health and you will very likely find that she has some trouble at her periods as well as many other minor ailments.

That the natural process of child-bearing should be attended with the amount of suffering and risk that is heard of nowadays surely shows that a screw must be loose somewhere; in vegetarian countries labour is a physiological process instead of the pathological one it is in this country. Some people after vigorous exercise, such as hunting, become so stiff as to be scarcely able to move, yet they are generally considered as being perfectly healthy.

The fact that this state of affairs can be and actually is conceded by general opinion to be perfect health is in itself proof that the modern standard of good health is a poor one. If you remark that such "minor ailments" hardly constitute perfect health, the reply so often is, "Oh, but everybody has these some time or other!"

The lowering of the general health is continually being ascribed to the "wear and tear of modern life!" Every reason but the true one! Did people live on the correct diet, the so-called "wear and tear of modern life" would not affect them at all.

A person living on the Uric-Acid-Free Diet always has a better blood colour than a similar person on ordinary diet, and the blood colour may be taken as the index of good health, for the blood colour always varies directly with the state of the general health. In taking the blood colour of any person you must not go by the colour of the cheeks or lips, as the colour there is often fictitious, owing to the natural, or maybe unnatural, pigment deposited there. The true blood colour must be estimated by means of the colour card (obtainable of Bale, Sons & Danielsson) from the colour of the normal healthy gums, the inside of the eyelids and the inner side of the lips. A girl, who is suffering from anæmia, often has quite a brilliant colour in her cheeks and would be classed by the ignorant as having a good blood colour, whereas the true state of the blood colour would be shown by the pallor of the gums, etc.

How many individuals of the well-to-do classes that one sees every day can be said to be really healthy? To the discerning eye very few indeed. Many of them, 'tis true, would pass for insurance, but then the organic disease has not shown its presence except in the form of "minor ailments," such as headache, etc., which unfortunately modern medicine takes no account of, for nobody regards headache or bilious attacks as of any real significance; whereas these symptoms are often but the forerunners of Bright's disease, which is in itself the commonest cause of apoplexy and accounted for no fewer than 25,270 deaths in 1910. One cannot say of the well-to-do classes, as one can of the poorer classes, that the apparent ill-health is due to lack of sufficient nourishment; is it not rather the very reverse—overfeeding, and overfeeding on the most injurious foods. Just glance at the modern menu at, say the Savoy, or the Ritz, and it will be seen to be a selection of those foods that contain most of the poisonous products that it is the endeavour of the Uric-Acid-Free Diet to eliminate; there is hardly a single dish that is not full of uric acid or its allies.

With regard to "minor ailments," I will give a few instructive quotations from Professor Irving Fisher's

Report on National Vitality (Washington Government Printing Office, 1909, pp. 4 and 38-39). "Minor ailments are far more common than most people realize." "They are often carefully-guarded secrets. The individual often only knows his own physical troubles, but is unaware that almost every person about him has such troubles also. Once you penetrate beneath conventional acquaintance there will almost invariably be found some functional impairment of the heart, liver, kidneys or bladder; or dyspepsia, gastritis, jaundice, gall-stones, constipation, diarrhœa; or insomnia, neurasthenia, nervousness, neuritis, neuralgia, sick headache; or tonsillitis, bronchitis, hay fever, skin eruption, catarrh, grip, colds, sore throat; or rheumatism, lumbago, gout, obesity," etc. etc. (Every one of these is preventable by the Uric-Acid-Free Diet.) "These deserve more attention than they have hitherto received, because they are the gateway to more serious troubles." "If what seem to be 'mere colds' were less commonly neglected, tuberculosis would be more often caught in its incipiency, and pneumonia and diphtheria would often be prevented." "If the first twinges of rheumatic pains were heeded, gout and the dreaded arthritis deformans would lose most of their terrors."

"The American neurasthenia, widespread and subtle, has its grip on thousands of men and women, driving them from home and affairs annually to sanatoria or various health resorts, and so breaking down their average vitality as to render them much more liable to serious sickness and death. This the most widelyprevalent of all nervous disorders in this country, seems to be on the increase."

"As to the extent to which minor ailments exist no statistics are available. Dr. Castle of Cincinnati, estimates, from an experience of many years in the medical supervision of institution employees and general practice, that there is an average of at least three days' time lost annually for each person in the population because of minor ailments. Similarly Dr. J. F. Morse, of the Battle Creek Sanatorium, who has had a long experience in dealing with a large number of cases, estimates that the average 'well man' loses on an average five days a year on account of headaches, toothaches, 'colds' and similar minor ailments which do not come under the head of any of the diseases reported."

"That almost all minor ailments can be avoided is scarcely to be doubted. Dr. Gulick is 'inclined to believe that something like nine-tenths of all the minor ailments that we have, and which constitute the chief source of decreasing our daily efficiency, could be removed by careful attention.' 'With the removal of nine-tenths of our disabilities and the conservation and further development of our natural powers,' he adds, 'the average person can increase his efficiency 100%, that is he can be twice as effective.' This does not refer to doing merely or mainly twice as much work, of course, but by making less mistakes, and by working at a higher degree of speed when he does work. By working under conditions so that the work does not need to be repeated, the whole total will be much greater

—I think not too much to say twice as great—as under ordinary conditions."

On page 33 of the same publication Professor Irving Fisher says:—"While statistics are lacking, a wide observation seems to justify the conclusion that it is difficult to find a man or woman over forty whose health has not become impaired in some manner. Few who have not studied the facts realize how common illness is, although we all know it is sufficiently common to make the question 'How are you?' the ordinary form of salutation."

"An ideally healthy life, free throughout from ailment and disability, is rarely if ever found."

What applies to the United States is equally applicable, I think, to the United Kingdom of to-day. The above constitute a pretty powerful indictment of the modern accepted standard of health. I have seen the Uric-Acid-Free Diet remove in my own case and in those of many others most of the above-mentioned "minor ailments." The latent possibilities of diet in this direction are enormous, were people only to open their eyes to facts.

"Is it not impossible to keep up one's strength without meat?"

It has been proved conclusively over and over again that the popular idea that it is impossible to be strong without taking meat is quite an erroneous one, yet the same futile arguments are still trotted out about meat containing some substance or other that is essential for life and similar nonsense. The upholders of such arguments take no notice of the fact that the teeth of man demonstrate pretty conclusively that, whatever else he may be, man is not a carnivore; and a deaf ear is turned to the fact that comparative anatomy classifies man with the large apes, with whom his structure is identical (see *Diet and Food*, pp. 86-88).

The strength of a man on Diet is just as great as when he was on Meat Diet, but (and this is the point) his endurance will be found to be enormously increased when compared to what it was on Meat Diet. Take two men of equal strength, and it is the one who has the endurance and lasting power who will win the day. But Diet goes further even than this: take a man who was a strong man on Meat Diet, this same man on Diet will be stronger still, because he will be in better health, and better health means greater strength and increased fitness. The man on Diet can last better than his fellow on meat because he experiences less fatigue. Mosso and others say, " Muscular fatigue has been proved to be a chemical effect, due to the circulation of ' fatigue poisons ' in the blood." (See *Fatigue*, English translation, New York, Putnam, 1904). " In order to reduce fatigue, therefore, we must reduce ' fatigue poisons ' " (*Report on National Vitality*, Washington, 1909). " Fatigue poisons " mean nothing more nor less than uric acid, and it has been proved over and over again that to prevent fatigue one must prevent uric acid getting into the blood. (*See* pp. 153, 159; also *Diet and Food*, pp. 31-47.)

The difference between strength and endurance is defined as follows:—"Strength is measured by the utmost force a muscle can exert once; endurance by the number of times it can repeat an exertion requiring a specified fraction of the available strength at the start. Thus, if each of two men is barely able to lift a dumb-bell weighing 100 lbs., their strengths are equal, but if one of them can lift a dumb-bell weighing 50 lbs. twenty times, while the other can raise it forty times, the latter may be said to have double the endurance of the former. Another mode of expressing the same thought is that endurance is measured by the slowness with which strength decreases through exertion."

To quote a few experiments showing that uric-acid-free feeders (some of the vegetarians are uric-acid-free or nearly so) were able to demonstrate their superiority in endurance to meat-eaters, I will give a digest from "Diet and Endurance at Brussels," by Drs. Joteko and Kipiani (*Science*, vol. xxvi., 1907, pp. 561-562):—

"Comparative experiments on seventeen vegetarians and twenty-five meat-eaters in the laboratory of the University of Brussels have shown little difference in strength between the two classes, but a marked superiority in point of endurance. The average superiority was 53%. The vegetarians recovered from fatigue more quickly than the meat-eaters."

I now quote the conclusions of Professor Irving Fisher of Yale University, in his article, "The Influence of Flesh-eating on Endurance" (*Yale Medical Journal*, March, 1907), copies of which are obtainable from Baylis House. I advise all who are in doubt as to the Uric-

Acid-Free Diet and the ability to keep up strength on it to look through this pamphlet. He says:—

"*First.*—Of the three groups compared, the large flesh-eaters showed far less endurance than the abstainers, even when the latter were leading a sedentary life. *A fortiori* must the large flesh-eaters of the sedentary type be inferior in endurance to abstainers.

"*Second.*—In view of (1) the great extent of the superiority shown, (2) the heavy handicap imposed upon the abstainers, and (3) the absence of other known factors to account for their superiority, it is improbable that this superiority can be explained away by adventitious circumstances.

"*Third.*—It is possible that the superiority of the abstainers is due to the absence of flesh foods or to the use of a small amount of proteid, or to both, as well as to the abstention from tea, coffee and condiments."

I must say here that I cannot in any way endorse Professor Irving Fisher's suggestion that the increased endurance of the flesh-abstainers was due to "the use of a smaller amount of proteids." From my own experience of athletics I can say that to attempt to train on the Chittenden proteid standard is fatal for any test involving prolonged exertion. I have found it impossible to come through any test of endurance satisfactorily on reduced proteids. Eleven grains per pound of body weight is the lowest proteid standard that can be adhered to with any benefit for prolonged and abnormal exertion. Less than this, I find, means less strength and endurance.

Elsewhere in the same article Professor Irving Fisher says:—"Allowing for the heavy handicaps placed on the winning side, it may be inferred without reasonable doubt that the flesh-eating group of athletes was far inferior in endurance to the abstainers, even the sedentary group." "From this it is seen that the untrained abstainers were able to last better than even the trained flesh-eaters."

With reference to the after-effects, Professor Irving Fisher says:—"From arm holding, there were, curiously enough, very little after-effects, either in the case of the flesh-eaters or the abstainers. But deep knee bending left painful after-effects with all, though they were far more marked for the flesh-eaters than for the abstainers. Thus among the latter, those who held two of the highest records, 1800 and 2400, were not incapacitated. The former, who is a Yale athlete, took a run on the track of the gymnasium after his performance, and a long walk afterwards; and the latter, who is a nurse at the Sanatorium, continued his duties and found little annoyance from stiffness or soreness. On the other hand, among the flesh-eaters, G. K. had reached his absolute limit at 254 times and was unable to rise from a stooping posture the 255th time. He had to be carried downstairs after the test and was incapacitated for several days. The same was true of C. S. M., who, in fact, was seriously alarmed about his condition for two weeks. He had fainted after 502 deep knee bendings. Again, W. J. H., the long-distance runner, was so stiff and sore and inconvenienced that he and his trainers feared that he would not be able to compete in races for which he had been scheduled some weeks later. Fortunately these fears proved groundless."

These results show that not only is the flesh-abstainer far superior to the meat-eater, but that the latter runs great risks of injuring himself in endeavouring to emulate the performance of his non-meat-eating friend. One so often hears of athletes seriously injuring themselves, whereas had they been on the Uric-Acid-Free Diet they would not only not have injured themselves but would have been able to do much better, in the proportion to 502 to 2400. (*See* above.)

Whole nations live without meat and are quite healthy and strong, so why should not we do the same? I was much struck during my first visit to Egypt with the great strength exhibited by some of the natives. Some heavy cases of mine, that in this country required three men to lift them, were handled and carried upstairs by one man; yet meat formed no part of these natives' food.

My own personal experiences demonstrate the possibility of health and strength without meat.

One has only to glance at the long list of vegetarian athletic successes to see how utterly fallacious is the contention that meat is essential for strength. Mr. H. Light, who superintends the feeding of the vegetarian athletes, has kindly furnished me with a record of vegetarian athletic successes from which I make just a very few extracts for the information of those who are not *au fait* with this subject:—

F. H. Grubb holds the World's Record for 12 hours on the bicycle unpaced with 220½ miles, and C. F. Davey, inferior only to Grubb, has done 215½ miles in the same time, both men holding many other records.

G. A. Olley holds the World's Record for 50 miles on the bicycle on the road unpaced of 2 hours 17 min. 39 sec. Mr E. H. Miles' name as the holder of many championships at racquets and tennis is, of course, very well known. In running, E. R. Voigt's name is also well known in athletic circles. In walking, G. H. Allen in 1908 went from London to John o' Groat's, 840 miles, in 13 days 23 hours, excluding Sundays, averaging 60 miles a day. In 1910 Freddy Welsh won the Light Weight English Championship for boxing. I might continue almost *ad lib.* but space forbids.

I have the kind permission of the editor of *The Wycliffe Star* to quote some interesting data from Wycliffe College, Stonehouse, Glos., which consists of some 150 boys, about one third of whom are vegetarians, the majority of the latter abstaining entirely from tea, coffee and pulses during term time at least. In the spring of 1911 a shooting match was arranged between the vegetarians and the meat-eaters, nineteen on each side. The " Vegeys " scored 1024 points to the " Carnivores' " 707, and in a second match, which arose from the result of the first, the scores were 1095 to 962 in favour of the " Vegeys," 864 and 958 as against 762 and 885 for the " Carnivores."

In March 1911 the Senior Cross Country Race (5 miles and a climb of 500 feet) was run in record time by a vegetarian, and five out of the first eight home were vegetarians. In the Junior Cross Country Race (3 miles and a climb of 400 feet) of the same date four out of sixteen competitors were vegetarians and gained first, second and fourth places respectively. In the

Senior Cross Country Race in March 1912 the "Vegeys" claimed five out of the first seven home, the winner being a life vegetarian who also holds the record of never having been on the sick list during all his years at school.

A further point of interest is revealed on looking into the case of the life vegetarians who have passed through the school, for one discovers that they possess a record in its intellectual and athletic life which the meat-eaters can never hope to touch. More than 80% of the former have obtained a first-class in honours in the University Local Examinations, and, although until recently their numbers seldom averaged more than two or three per cent. of the boys in the school, they retain nearly half the records in the school sports.

This is a very interesting experiment, and one that reflects no little credit on those supervising it. The results are the more remarkable when the proportion of the vegetarians to the meat-eaters is taken into consideration.

I use the hand dynamometer as a test of strength both before and after changing diet, making due allowance, of course, for the influence of other factors. If Diet is properly carried out there should be no loss, but rather an improvement in strength. My own figures with this instrument are 140 lbs. for the right hand and 130 lbs. for the left.

To return again to Dr. R. Hutchison's criticism about the Purin Free Diet, which I have already referred to in ch. v., p. 82, under my own experiences. Those who go in for the salt-free or for the low proteid diets, both most excellent as temporary treatments of disease, for any length of time, cannot expect to keep free from "digestive troubles and impairment of the general health" for reasons I give elsewhere (p. 61 and p. 114). The same applies to those who will break some of the fundamental rules of diet, whether from ignorance or pigheadedness; they can expect nothing else, and certainly cannot say that their breakdown or failure on Diet is in any way due to the Uric-Acid-Free Diet; exactly the same results would have occurred had they persisted in such folly on ordinary mixed diet. Some people having commenced the Uric-Acid-Free Diet seem to think they can take up any fad they fancy, and then when the inevitable breakdown occurs, they blame diet instead of their own folly; whereas had a little common sense been exercised and the ordinary rules of the Uric-Acid-Free Diet been obeyed, no such misfortunes would have occurred.

This brings me to rather a delicate point, namely that people without any vestige of physiological education set themselves up as Diet specialists, advising others what to do, how to do it and even treating cases of disease. Such people too frequently cause others to go astray, running them into dangers that under proper guidance should have been avoided, and for which Diet is only too often unjustly blamed, bringing undeserved discredit on the cause of genuine Food Reform. These self-constituted and unqualified guides are dangerous and should be avoided. That such a state of affairs should exist with regard to diet is, I think, very much the fault of the medical profession. Practically no attention is paid to food in the curriculum of medical education, so no wonder the grossest ignorance prevails on the subject of food, and this is a state of affairs that is a direct encouragement to quacks.

Every child in the schools should be taught something about food, and should learn the proteid values of the common foodstuffs in use, much the same as he learns arithmetic nowadays. Young adults should be taught to discriminate between foods and stimulants, also which foods are best for the wits or for the muscles, or those best for the " wind " and endurance, etc. If this were done, such crass ignorance as that which maintains that skim milk is worthless as food, the superstition that beef is more nourishing than cheese, and all similar nonsense, could no longer flourish in the way it does at the present day. The poor would then know how to spend their money to the best advantage, instead of on such poisonous stimulants as tea. I have often been told by people, who should know better, that they were sure that tea contained a lot of nourishment because it picked them up so. If such ignorance about food exists among the educated classes, what can be expected of the poor? (*see* p. 151).

Only those who have had a training in anatomy and physiology are really fitted to understand and teach diet. So instruction in diet must remain the monopoly of the doctors, who at present, unfortunately for all, pay very little attention to questions of feeding. Obviously it is impossible to cure diseases due to food poisoning so long as the cause is permitted to remain in action.

I have met many others who have obtained greater benefits than I have myself, simply by following the ordinary rules laid down with regard to Diet. There may be a few whose health would not be benefited by Diet, but they must be very few, because, as I have shown elsewhere (p. 94), the modern standard of general good health is a low one; and it is lowered by those very conditions or affections, call them what you will, that Diet can and does improve, conditions identical with those I suffered from myself and from which Diet freed me.

I maintain from my own experience and from those of others, that the health of everyone would be greatly benefited by living uric-acid-free, for what has been done in the case of many can be done in the case of more, in spite of the old adage about one man's meat being another man's poison, which is about as untrue as any saying ever was, as uric acid is a general poison.

This saying may be true for minor matters, but for the important factors in life, such as uric acid, it does not apply. One might just as well say that air could be breathed with safety by one person and yet would be a poison to another. The effect of uric acid on the body is too demonstrable and important a matter to be influenced materially by the personal factor. I am not denying that there is such a thing as the personal factor, but I maintain that the personal factor is only a difference in detail, not, as so many would have us believe, the *fons et origo mali*. The fact that one person cannot take strawberries for some reason or other while another can, is just a matter of detail (often due to time of life or quantity of uric acid available), but to say that uric acid is likewise a similar detail is a futile and dangerous argument, as is evidenced by the huge mortality due to uric-acid diseases every year (*see* p. 92). The usual standard of good health would be raised to a higher level by the adoption of the Uric-Acid-Free Diet instead of getting lower as it is doing at present. Think what the improved health of the nation would mean, improved efficiency all round to the extent of 100% (*see* p. 98), better work, less poverty, etc. etc. After all, the nation depends on its food for everything, for on its food depends its health. Better the quality of the food and you better the nation's health. Real good health is one of the greatest blessings mankind can obtain; is any sacrifice too great to make for it? What is the trouble entailed by changing one's diet compared to the benefits conferred by the improved health gained thereby? The difficulty lies not so much in getting people to change their diet, as to get the so-called healthy people to see that they are not really healthy at all! Their very lapse from perfect health blinds them so that they cannot see or realize how very much more healthy they might become.

I sometimes hear the complaint that persons on Diet still get colds, slight bronchitis and similar " minor ailments" in spite of having been on Diet for some years.

The only reply to this complaint is that people on

Diet, who suffer in this way, have only themselves to blame, for they must have been making errors somewhere, either from ignorance or obstinacy. I know from my own experience that such " minor ailments " are a sure sign that the rules of the Uric-Acid-Free Diet are not being strictly obeyed. Laxity with reference to the rules about underfeeding, exposure to cold (especially during the morning hours), too light clothing, too much fruit in cold weather, or too lax adherence to the strict diet, and similar small backslidings are quite sufficient to account for everything. Such carelessness, call it what you will, in small details, such as these, creates a small store of uric acid and thus causes such " minor ailments." Underfeeding of course lowers the resistance of the general vitality and renders one more liable to infection by any stray microbe that may be about (see *Medical Record*, September 1910). If Diet is really strictly adhered to and the rules about cold, etc., no longer broken, I can say from my own experience (for I have often made mistakes) that such " minor ailments " will all clear up. In fact such pin-pricks should always be taken as gentle reminders that mistakes are being made somewhere or other; so find out where the mistakes are being made, rectify them, and these " minor ailments " will disappear, never to reappear unless these or similar errors are committed again (*see* also *Some Mistakes that may prevent the Best Results of the Uric-Acid-Free Diet.* Bale, London).

Those who go to Switzerland and similar cold winter resorts get braced up by the cold, the bracing being a sign of retention of uric acid; and then on their return home collæmia results with colds and other "minor ailments." It is really extraordinary how many people get ill (I am referring to meat-eaters now) on their return home from Switzerland; but the action of the cold on uric acid explains the whole of it. Those who have been carrying out Diet properly for some years, provided they have got rid of all their old stores created by their meat diet, should never require to be braced up; the mere fact that there is a feeling of a need to be braced up is a sure sign that they have been making a mistake somewhere and have been retaining.

The foods permitted on the Uric-Acid-Free Diet contain a considerable quantity of calcium, and one of the arguments put forward by doctors against Diet is that the excess of calcium must cause stone in the kidney and calcification of the blood-vessels. Of this there is no proof whatever, as it is generally held that the intestine never absorbs more of a mineral substance than the tissues require (*Food and Dietetics*, by Dr. R. Hutchison, 3rd Ed., 1911, p. 290). Such changes as do take place must be attributed to the general effect of uric acid on the circulation and are therefore confined to those on Meat Diet. Talking of the so-called dangers of the excess of calcium on the Uric-Acid-Free Diet I have actually heard of a doctor who advised a child being taken off the uric-acid-free food because of the lack of calcium, saying that what the child required was calcium salts!! Yet milk is the food richest in calcium and meat is the poorest!!! Anyway there is no foundation for the statement that Diet causes either stone or calcareous arteries; but where such conditions existed before Diet was begun, Diet can hardly be said to have caused these conditions. Arteries are injured much more often by the strain of chronic high blood pressure (of which collæmia is a cause) than by any excess of calcium salts. What sometimes happens in cases of stone is that the stone has been lying quiescent and only the solvent effect of Diet makes its presence known.

The common argument against Diet that uric acid taken by the mouth is converted into the harmless product urea is based on a misconception of the facts. Uric acid taken by the mouth or injected directly into the blood stream undoubtedly causes a rise of urea under certain conditions, but to argue from this that the uric acid has been converted into urea is basing the proposition on a fallacy, for sugar, mercury, or anything else that clears the blood of uric acid, also causes a rise of urea. Yet it can hardly be claimed that the sugar or mercury have been converted into urea, for neither of them contains the nitrogen necessary for the formation of urea!! (See *Uric Acid*, 7th Ed., pp. 343, 496; also *Diet and Food*, 6th Ed., p. 19).

The rise in urea in all these cases is due to the clearance of the uric acid out of the blood, and the consequent improvement in the circulation and quickening of metabolism, in other words, the fire burns up better, for the uric acid has acted as a stimulant (*see* p. 154). But if uric acid be taken by mouth in a case where care has been taken to ensure the blood being in a condition to dissolve more uric acid, there will be no rise of urea; on the contrary there will be a fall, owing to the increased uric acid in the blood making the circulation and metabolism more defective.

Experiments in living on reduced quantities of proteid, *i.e.* less than 9 grs. per lb. of body weight, by those who are not conversant with physiology are dangerous, and sooner or later end in disaster, for which Diet is most unjustly blamed. It has failed because one of its cardinal and most essential rules has been broken. You might just as well deliberately run an engine past the signals set at danger and then blame the engine for the ensuing disaster, as blame Diet for causing the breakdown when the most urgent warnings against underfeeding have been disregarded.

Members of the medical profession are constantly stating that the Uric-Acid-Free Diet is a low proteid or starvation diet: this I absolutely and most emphatically deny. It is only necessary to read what has been said on the preceding pages about proteid, and the rules laid down on pp. 50-53, to see how groundless this accusation is. An individual, who on ordinary mixed diet obtains a certain daily amount of proteid, will, when on the Uric-Acid-Free Diet get identically the same amount of proteid, the difference being that he will obtain the proteid from uric-acid-free foods instead of from foods containing uric acid; the physiological rules that govern the amount of proteid that a person requires on mixed diet also give the amount of proteid that a person requires on the Uric-Acid-Free Diet. One of the fundamental rules of the Uric-Acid-Free Diet is that an individual must take the daily quantity of proteid that physiology dictates and, if for some reason or another he is unable to obtain sufficient proteid from the uric-acid-free foods, then, rather than that underfeeding should be permitted, the balance of proteid must be made up from the uric acid foods. Underfeeding cannot be tolerated in any form in the case of a normal individual. Where pathology has supervened then temporary underfeeding may be permissible in certain cases, but then only under medical supervision. Low proteid diet is used only as a temporary treatment of disease, and to attempt to use it in any other way will only end in a general breakdown in health. I have come across many instances of this fact, more especially amongst those who, ignorant of the working of the body in health, have coquetted with the very attractive Chittenden theories. For a time the experimenter has done well, and generally improved in health, but sooner or later, or even after the lapse of a few years the inevitable breakdown has supervened, only too often ending in death. Such people are very often vegetarians or on some form of Uric-Acid-Free Diet, and when the breakdown comes, Diet is always held up as the cause of it; a more unjust accusation cannot be imagined!

Part, no doubt, of the improvement in the general condition of those adopting the Chittenden standard of proteid is due to the absolute decrease in the daily intake of uric acid. In addition, the Chittenden Diet often contains a large quantity of carbohydrate, *i.e.*, cereals, sugar, etc. Taken in this form it is a very stimulating kind of diet, for the high acidity of such foods causes a rise in the body acidity with consequent retention of uric acid and a corresponding feeling of increased health and strength. The improvement in the general condition has been attributed by the Chittenden adherents to the low proteid intake, whereas the true causes are (1) the actual decrease in the uric acid intake, (2) the retention of uric acid due to the high acidity caused by the carbohydrates.

A similar improvement is seen in eclampsia (convulsions at or near the end of pregnancy) from an 8-10 days' treatment by strict Milk Diet (*see* p. 120).

Were a person, who had been on Uric-Acid-Free Diet for several years, to adopt the Chittenden proteid standard, the improvement noted above would be small or even absent altogether (*see* also p. 61).

CHAPTER VII

WOMEN AND CHILDREN

EFFECTS OF DIET ON MENSTRUATION, PREGNANCY AND LACTATION: FEEDING OF CHILDREN: SOME EXPERIENCES AND MISTAKES

WOMEN, as a rule, have weaker hearts than men. This fact accounts for it being so much commoner for women to suffer from " nerves," neurasthenia, hysteria, etc., all of which are due to a naturally weak heart beginning to give way under some strain or other, with consequent defective circulation in the great nerve centres in the brain. The effect of uric acid on the general circulation is just enough to upset the balance of the heart so that it is just not quite up to its work, for a naturally weaker heart has smaller reserves. In fact one might say that a woman is always nearer the danger zone because of her weaker muscles.

Moreover woman by reason of her function as a mother is exposed to much greater natural strains. Consequently Diet which so marvellously improves the circulation confers greater benefits on woman by increasing her reserve powers, and in addition raises her maternal powers to a more natural level than that to which the physiological process of child-bearing has been reduced at the present day.

Many women who have adopted Diet for other reasons find that it has been a great relief to them at their periods, when they are so often subject to pain, headache and other troubles. All the "minor ailments" of this time clear up after Diet has been tried for some little time and the periods become quite normal. Excessive loss at the period has also been greatly influenced by the patient going on to the Uric-Acid-Free Diet. I know of some cases where the flow lasted over nine days; this was reduced to two days by the Uric-Acid-Free Diet. A remarkable and very interesting point with regard to one or two of these cases was a tendency for the flow at a period to be missed out altogether. These last cases have since married and had children without any trouble whatever. Can it be that by living on a more natural diet woman would have her periods gradually coming to correspond with those of the other mammals? Need ovulation necessarily be accompanied by hæmorrhage, or is the latter only a pathological symptom? These are most interesting points and require further investigation.

So common are troubles at the monthly period that they are looked upon as the usual thing nowadays instead of being regarded as abnormalities. I remember a girl who had been on Diet for a few months came to me in a great fright one day because the pain that she usually experienced at each period had begun to get less and had now quite disappeared, so that she thought that something must have gone wrong! By being very strict about reducing fluids a day or two before a period is due, great relief from the pain and discomfort of this time can be obtained.

One day, when in Egypt, I happened to notice a native woman, who was working in the fields, retire under a tree where she gave birth to a child. At the end of it all she quietly left the child wrapped up and went on with her work, so far as I could see, much as usual. I must say that I was very much astonished at the absolutely unconcerned manner in which the woman appeared to treat the whole affair, especially when I thought of the suffering so many women in this country must endure in what has become a pathological process.

I did not appreciate the true significance of this incident, for I had not at that time any knowledge of physiology, but in the light of more recent knowledge I should say that the ease with which this woman passed through her labour was largely due to her diet. The diet of the natives in Egypt consists of unleavened bread, cereal foods of different kinds, such as maize, cheese made from buffalo or camel's milk, lentils or beans, dates and fruit. Sugar cane they are particularly fond of when it is in season. Eggs they get occasionally. So with the exception of the pulse food, of which not very much is eaten, their diet is very nearly uric-acid-free.

It is, I think, a fact that the nearer a woman approaches the uric-acid-free standard in her food the easier the time she will have at the birth of her children, other factors of course being equal.

Mothers, who have adopted the Uric-Acid-Free Diet and then had another child, have noticed what great benefits Diet has conferred on them during the period of pregnancy. Morning sickness does not appear at all, alarming feelings of faintness are absent, and all the discomforts associated with this stage are greatly decreased, because of the improvement in general health. The actual labour loses most of its pains and terrors, becoming more natural, and any abrasions heal up with less trouble owing to the better circulation. A great difference has been noticed in the dangerous puerperal period (*i.e.* that following the birth of the child) when the liability to complications, such as eclampsia, heart strain, Bright's disease, etc., is greatly decreased. The highly dangerous eclampsia (convulsions that come on near the end of pregnancy and afterwards) may be regarded as a type of particularly severe uric-acid storm, from which those on Uric-Acid-Free Diet would be exempt. In this connection it is of interest to note the following:—Sir William Smyly, M.D., at the annual meeting of the British Medical Association at Liverpool, July 1912, said that it was well known that a restricted diet was of benefit in threatened eclampsia, and that milk diet was looked upon almost as a specific remedy for this distressing condition. He also stated that Pinard lately declared that he had, during 35 years' experience, never seen a patient develop eclampsia who had been on milk diet for eight days, and that as long ago as 1875 Tarnier stated that eclampsia positively would not occur in a patient who had been on a diet of milk only for a week. In addition, the recovery from the effects of labour has been much quicker. Moreover a healthier mother means a healthier and better-developed child. In fact, a woman has everything to gain from the point of view of her maternal functions by living on the Uric-Acid-Free Diet.

Ability to nurse their children is another benefit conferred by Diet on women, who have hitherto been unable to fulfil this natural function owing to lack of milk or for some other reason. This is most important from the child's point of view, as of course it thrives very much better on its natural food. Inability to nurse her child is a marked characteristic of the modern woman, which there is reason to believe is intimately connected with errors of diet, for mothers who have been unable to nurse their children while on meat diet, have had plenty of milk when on the Uric-Acid-Free Diet.

Why should, as has been noticed nowadays, its own mother's milk make the child ill? Surely the food provided specially for the infant by nature ought to be the best for it! Can it not be explained by the suggestion that the harmful diet of the modern mother causes her to secrete milk containing some noxious matter that is detrimental to the child's health? The feeding of cows has an influence on the quality of the milk, so why should not a woman's milk also be influenced by her food?

I know of a case where a lady had been to many doctors who all agreed that it was quite impossible for her ever to have a child. She went on to Diet to encourage her husband in a diet experiment, with the unexpected result that about two years later she became pregnant and had a full-time child. During pregnancy one of the specialists said that it was a growth that ought to be cut out! The child has been brought up on a natural diet, and is, I hear, a fine specimen.

Diet undoubtedly increases fertility, and should certainly be tried in all cases where there is no apparent reason against the birth of a much-desired child. But where Diet is tried in such cases both the husband and wife should adopt it, so as to utilize every possibility. A better general circulation and a higher standard of health would of course affect the organs of generation also, so that the chances of conception would correspondingly be increased. Diet should certainly be tried in such cases of failure of conception, especially when other methods have been adopted without the desired result.

Dr. Chalmers Watson's experiments on the effect of Meat Diet on fertility in rats are most interesting and instructive. I give a short summary of his chief points, but I should advise those who are interested to read his article in the *Lancet*, 1906, vol. ii., pp. 145-149. A general deterioration is noticeable in the animals, of which stunted growth, sterility, diminution of lactation and impairment of the resisting power, together with a high death-rate among the young rats, are the chief signs. Whether one can argue from rats to the human animal is a moot point, but the fact remains that similar results are seen to-day in the human animal contemporaneous with the increase of meat-eating and tea-drinking. The chief interest of Dr. Chalmers Watson's experiments is in the fact that excessive meat diet in rats, whose dietetic habits are very similar to our own, produces the same evidences of deterioration that are afflicting the English people to-day. Excessive meat diet produced more serious results in the very young rats than in the older rats. When one often nowadays hears of babies a few months old being fed on raw beef juice, can it be wondered at that appendicitis is becoming increasingly prevalent among small children, when some years ago it was practically unknown! It is a significant fact that appendicitis is comparatively rare in some countries to-day, *e.g.* China, where the diet contains little or no flesh (see *British Medical Journal*, Epitome, vol. i., 1901, p. 65; also *Uric Acid*, 7th Ed., pp. 416, 440). Dr. Watson's results bear out what I say about the stamina of the modern child fed on the highly-stimulating present-day diet (*see* p. 140). In fact the results of an unnatural diet in rats closely correspond to the consequences incurred by the human animal through straying from his natural diet.

Another factor which must be an important cause of many sterile and unhappy marriages is the effect that uric acid has on the lining membrane of the vagina. Those who suffer from catarrh of other parts of the body, *i.e.* nose, throat, etc., are very apt also to suffer from catarrh of the vagina, which if chronic must interfere with its sensitiveness, causing sexual indifference. This form of catarrh is very much commoner than one would think, especially among the upper classes, where the increase in the taking of uric acid in its many forms has been so marked of late years. This same fact, no doubt, accounts to a large extent for the noticeable falling off in the birth-rate among the same classes.

These matters are of such national importance that I desire to direct marked attention to them, for they affect our very existence. The intimate effect of uric acid and the beneficial influence of the Uric-Acid-Free Diet on gynæcology and midwifery has as yet been scarcely realized.

Women also suffer a great deal from constipation; this can be relieved by the methods advised on p. 179, but after having been on Diet for some little time, constipation should disappear even though fluids have been reduced.

Obesity is another trouble that afflicts women, very often beginning after the birth of a child, when most likely the heart has been overtaxed and has not quite recovered. Many cases of obesity are due to a weak and failing heart and a correspondingly defective circulation, with the result that the fat is not properly consumed in the process of metabolism, but is deposited as waste material in the tissues. Cases of obesity due to such causes do very well on Diet, owing to the improved circulation relieving the overtaxed heart and so enabling the fire to burn up more briskly and consume the fatty deposits. For advice on obesity, *see* p. 181.

A subject that more closely concerns a woman than a man is the complexion. Many lady patients have testified enthusiastically to the beneficial results that Diet has produced in their complexions. The improved circulation in the skin doubtless accounts for this noteworthy point.

With reference to the bringing up of children on the Uric-Acid-Free Diet from the time they are weaned, I do not propose to say very much beyond giving some hints what to do after the usual time for weaning, tenth-twelfth month.

After weaning keep the child on cow's milk in the usual way till the end of the first year or so. Then when the time comes for giving yolk of egg and pounded chicken in the usual process of ordinary diet, give the child white of egg and freshly-made curd instead. Fresh fruit juice in season and well-mashed banana in small quantities can also be given.

By the time the teeth are all in place, an attempt should be made to get the child on to the nearest approach to the Ideal Diet that is possible, so nuts should be begun in small quantities and very cautiously at first. Begin with pine kernels; pass them through a nut mill and then pound them up in a mortar until they are of a thick creamy consistency; strain this through a cloth to remove lumps and give the child the resulting nut cream mixed with a little fruit juice or mashed fruit. Watch the stools carefully for any undigested particles; the bowels should not be opened more frequently than they were before, and there should be no suggestion of diarrhœa. If the nut cream seems to suit the child, continue this stage for two weeks or so, gradually increasing the quantity and varying the kind of nuts, giving hazels and Brazils, but not almonds (*see* p. 21). If the nuts disagree, either causing diarrhœa or passing through undigested, put off the attempt till a month or two later.

The next stage, supposing the nuts to agree with the child, is for the nuts to be ground and pounded, but not strained through a muslin cloth, and let the child chew them with his teeth. Watch the bowels and stools as before. Continue this stage for a month or two, if the nuts appear to suit.

The next stage is to give the child the same nuts removed from their shells, but not ground. See that he chews them well with his teeth, taking the same precautions as before. Continue this stage for some months.

The next stage is to give the child the nuts unshelled and let him crack them with his teeth, with the exception of the Brazils which might be too hard. Observe the same precautions as before. This will be very good for his teeth and jaw muscles, and should ensure proper development of the permanent teeth, so that the child will have a better set of permanent teeth than he otherwise would have had.

As soon as it is possible to collect the child's urine, a specimen should be taken from a 24 hours'-collection and the child's output of urea estimated (*see* p. 60).

When it is clear that a child can manage nuts without any digestive trouble, the amount of nuts should be increased, gradually decreasing the curd and white of egg and substituting nuts in their place. Always give fruit to be eaten at the same time as the nuts.

Do not give a child bread in any form, if it can possibly be helped. The same applies to any of the cereals with the possible exception of rice. The reason for this is that bread and the cereals are very acid, and, as a child's brisker metabolism causes it to have a naturally high acidity, the addition of the acid of bread is almost sure to make the child retain uric acid with consequent bronchitis, rheumatism, etc. Bread after all is not a natural food, and the endeavour is to get the child as near to its natural food, nuts and fruit, as possible. If the child be given no bread, the rule about restriction of fruit in cold weather need not be adhered to so strictly, for the general effect of a nut and fruit diet is alkaline, whereas the addition of bread makes the whole effect acid with consequent retention of uric acid.

Cane sugar should for the same reason—its comparatively high acidity—be avoided, except in very small quantities. Jam therefore made with cane sugar must be avoided, marmalade also; but of course jams and marmalade made without cane sugar are permissible. The child will get quite sufficient sugar from the sugars in the fruit. Fresh ripe fruit, or fruit preserved without sugar are best.

Vegetables, especially potatoes, are of great use in the child's dietary, but they should be begun carefully and in small quantities at first, for they are apt to cause diarrhœa. They are an excellent means of regulating the bowels, but the nut-fed child should never be bothered with constipation.

Older children that have been on Meat Diet for some years should commence with " Beginner's Diet " and then gradually try and work on to a nut and fruit diet if possible.

As a child's acidity is naturally very high, special care must be taken to prevent retention of uric acid by exposure to cold; cold affects children more than adults, because the proportion of body surface to bulk is very much greater in children. Bare legs and socks should be strictly taboo. This is a point that does not seem to strike mothers, but it is a most important one and is at the root of many childish illnesses.

During the recent cold summer, I saw a child of just over two playing about in the garden with socks on and only a thin jersey on its arms. The mother seemed very surprised when I told her she was injuring her child by clothing it in such a fashion; it had apparently never entered her head that the child felt the cold, yet there it was with its arms and legs absolutely blue.

There is no necessity for a child to be too fat, in fact the child that is too fat is usually diseased. The pictures of fat children that one sees as advertisements of different baby foods are to the discerning eye practically always pictures of disease; nearly every one of these children shows obvious signs of rickets. Yet the public think that fat and good health are synonymous terms in a child. Monstrosities, such as the recent Fat Boy of Peckham, are nothing but masses of obvious disease.

I will now give a table showing how the proteid allowance for children at different ages can be obtained. It is obvious that a child requires more albumen in proportion to its weight than an adult, for a child has to obtain albumen for its daily metabolism and for its growth as well.

A child	up to	1½-2	years of age	requires	as much proteid as an active adult	4	times	its weight.
A child	do.	7-8	do.	do.	do.	3	do.	do.
A girl	do.	14	do.	do.	do.	2-1½	do.	do.
A boy	do.	16	do.	do.	do.	2-1½	do.	do.

As a girl reaches her year of greatest growth two years before a boy of the same age, boys over 16 and girls over 14 require but slightly more than an adult of equal weight up to the age of 25, when full physical development is attained, but 10.5 grs. of proteid per lb. of body weight should be allowed for.

To take a few examples:—A child of 1½ years, weighing say 27 lbs., will by rule require 27 × 4 × 10 = 1080 grs. of albumen. A child of 7, weighing 3 st. 8 lbs., will require 50 × 3 × 10 = 1500 grs. of albumen, or in other words as much proteid as an active adult whose net weight is 10 st. 10 lbs. A girl of 6 st., aged 12, will require as much albumen as though she weighed 12 st., etc. etc.

Generally speaking, it is far safer to overfeed a child than to underfeed it, for underfeeding a child is especially bad, as it interferes with its proper development and makes it more vulnerable to the attack of tubercle bacilli and other microbes, which are especially prone to attack the underfed and ill-nourished at all ages. It is underfeeding and the depressing effects of exposure to cold that increase the vulnerability of calves to tubercle.

By the above tables a child aged 3 years and weighing 35 lbs. requires 35 × 10 × 3 = 1050 grs. of proteid per day. I will now give the amount of food, worked out in meals, that such a child should eat in order to obtain its requisite daily allowance of proteid.

Breakfast.	grs. of proteid.
2 whites of egg	120
1 oz. pounded nuts (Brazils and hazel)	68
Mixed with 3 oz. fresh fruit	6
3 oz. (*i.e.*, 3 heaped tablespoons) milk rice pudding	102
2 oz. fresh fruit	4
	300
Dinner.	
1½ oz. pounded nuts (pine kernel and hazel)	102
Mixed with 4 oz. dates	32
Curd of 1 pint of milk	230
4 oz. fresh fruit	8
1 oz. figs (dried)	18
¼ pint of milk	65
	455
Tea.	
Much the same as breakfast	300

Total proteid = 1055 grs. per diem.

As an instance of a mother's practical experiences in bringing up her children on these lines, I quote (with the kind permission of the editor) from a letter (under the *nom de plume* "M. Lenorme") in the *British Health Review*, vol. i., 1909, pp. 248-250, saying how she brought up her two daughters:—

"I began my own experiences as a food-reformer when I was twenty, married at twenty-two, and my eldest daughter was born eighteen months later. I think the fact that I myself had been living like this was a great point for the children. Before her birth I lived even more plainly than I had done before. I ate only two meals a day, chiefly an abundance of nuts, fruit, salad and special biscuits, and gave up the one cup of weak tea which I had allowed myself. I took plenty of vegetable butter and olive oil, and had regular exercise and lived as much as possible in the open air. I went to bed at ten o'clock and in fact was as sensible as I knew how to be. It was a very interesting time, for my health was magnificent and I proved to myself and one or two others that no one need make a trouble of child-birth if they begin at the beginning. The child was born a week sooner than was expected and I had no doctor, only a nurse. I was ill two hours and sitting up in four days. The baby weighed a little over 7 lbs. and was perfectly healthy. I then began to consider what to do about her upbringing, for I was determined she should have the good of what I knew. I nursed her for twelve months and could have gone on longer. Most people would think this too long for the baby, and several mothers told me so, but as she and I were in robust health I went on. I did not increase my own food while I was nursing except that I drank barley-water flavoured with lemon in the morning and afternoon when I was thirsty. Of course people said I was not taking enough, but I did not listen to this. I cannot advise about baby ailments for she had none, and when she was vaccinated it did not take and I would not have it done again. The teeth came without trouble. From four months old I gave her strained fruit juice daily, a teaspoonful at a time. Also I could not believe it was right to feed her so often as babies are fed. It cannot be good for the digestion. So I only fed her every four hours in the day and once in the night. I don't know if this would answer with all babies. It did with my two.

"At twelve months old I weaned her. She had four meals in the 24 hours then, of milk and grated super-cooked biscuits and rusks, with plenty of fruit juice, bits of orange to suck, and hard biscuits to suck also. The fruit was never sugared. She had nothing but what was ripe. The next stage after this was dinners of mashed baked potato with vegetable butter and the white of a lightly-boiled or scrambled egg, or sometimes two as she got older. Fruit always, no puddings, and milk to drink. On these foods I taught her to chew, for it needs teaching. Sometimes she had vegetable water with the potato, that she might have the salts. It may sound odd, but I never gave her bread. She began to be very fond of mashed dates and figs. They were a little troublesome to prepare, but it was fine food. The next stage was nuts, passed through a mill and eaten with the fruit and biscuits. These were ground into a cream—in fact we called it cream. Her breakfast then was nuts prepared in this way, a couple of dates and perhaps a fig, grapes or orange, and biscuits spread thickly with vegetable butter. Nearly always she had olive oil as well, because she liked it and I think the fat good. Her dinner was potato and butter moistened with vegetable water, with whites of egg as I have described, biscuits and butter, and fruit. Her evening meal was much the same as breakfast. We went on like this, only increasing her quantities, and when I was sure of her teeth, digestion, and chewing, I let her have the nuts whole, which she prefers. Cracking them gives time for the chewing. Now, at the age of nine, she eats what I do and wants nothing else—making good meals of fruit, salads without dressing, nuts, biscuits, and vegetable butter. These biscuits I have always made at home of Artox flour.

" I have followed exactly the same plan with my second daughter, who is two years younger, except that when I weaned her she could not drink cow's milk. It always upset her, so we did without, and I think that with wise feeding and care it need not be missed. After all, why should a child want it who has had its mother's milk for a long enough time? I may truly say that my children's health is satisfactory. Their height and weight are excellent, and I am really proud of their complexions, hair and teeth. Neither has ever tasted medicine. I object to salt, sugar, cakes, puddings and bread for them—the latter seems to be indigestible and constipating. So they have none of these things. I did not allow even kindergarten education until the age of six, for I think a child has enough to do in growing and taking in its surroundings, and I would have waited even longer if my husband had agreed with me. My eldest is not behindhand now, and the younger promises well.

"I should like to say that I believe many mothers who think their children are anæmic and therefore need more food are making a great mistake. I am sure anæmia is simply poison and needs right nourishment, not more nourishment. Sometimes to give even less may do good. I see children being poisoned with meat gravies, which are a most objectionable decoction and given minced meat at two years old. It seems madness to me. I say it without boasting, and of course it may not be thanks to this feeding, but neither of my two has ever ailed, except in an attack of measles, and then I gave no medicine, nothing but lemon-water and fruit, by which I mean oranges and grapes to suck, and they came through with no trouble at all. The younger tore her leg badly once with some rusty wire fencing, a horrid-looking wound, but it healed instantly and I thought at the time that she either felt the pain less or took it much more bravely than I expected such a child to do. I think myself that perhaps children fed in this way are more hardy and less sensitive to pain, but I may be wrong. I preferred baked potatoes because I think nearly all the good goes out of them when they are boiled. Of course I have yet to watch my children through the early teens, but I am more than satisfied as far as I have gone. I did not give yolks of eggs because, when I have tried them myself, I noticed unpleasant results, and I gave up the whites for the children directly they could eat plenty of nuts. In conclusion, I think the best food in the world will be a failure if children are not taught to chew, and if they are allowed to drink tumblers of water when they eat. Good habits must be formed at once and then they are no trouble. Of course I firmly believe my own way of living gave them a better start than most children have. It must be good for the coming baby if its mother is never ailing and eats natural things. I should do just the same about bringing up a boy, but then there is the school difficulty and the ignorance of masters about these things, which makes it more anxious."

In answer to many requests " M. Lenorme " added to the above letter a few more interesting details given in a later number of the *British Health Review*, pp. 285-286, from which I make a few quotations:—

" I did not at first use Artox flour for the home-made biscuits I described. I have only known it two or three years, and before that used Seconds flour, but now I prefer the Artox. I often add milled nuts to the biscuits, which adds to their nourishment and is very nice. I learnt this from a recipe given some years ago by the editor of the *British Health Review* in a paper where I saw it. I think a great point is to accustom children from the beginning to monotonous foods. Of course this is flat heresy to most people, but no other animals want the changes we do. Each has its own food and keeps to it, and in fruits, nuts, cereals and vegetables enough change can be had. If children do not see varieties of cooked things on the table they will not expect or miss them, and the less cooking the better for all concerned. It gives trouble and is unnecessary and injurious in many cases. I think the stomach deals better with what it is used to and an appetite which wants tempting is not the right kind of appetite. I was present when the doctor was called in to the querulous, anæmic child of a friend. He was tempted with fish, eggs, chicken, soup, everything imaginable at his meals, but had no appetite. It was quite distressing, but did not surprise me, for he had four meals a day and chocolate when he asked for it. The doctor said it was essential that such a delicate nervous child should have plenty. He must have milk added, and be tried with raw scraped meat between bread and butter when he could not eat the ordinary meals, which must be made as tempting as possible. I suggested to his mother that it might be worth while to wait till he was hungry, and after much anxiety she agreed. He had eaten no breakfast, only played with an egg. When dinner came she asked if he were hungry. He said no, and none was given him, so after a few minutes he slipped off his chair and went into the garden. Chocolate was refused him, and he ate nothing all day but drank water thirstily on going to bed. He did not care for his next breakfast, and ate nothing all day but a slice of bread and butter. His mother said she should not be able to stand it if this went on, and I must own it was unpleasant except that the boy seemed so glad to be let alone. On the following morning he was very hungry and ate an egg with more relish than he had done for months. After this he ate no dinner, but was hungry again for a good tea. The mother began to learn something from all this, and he was left to his own devices for a time. It was a year ago, and he has now settled down to two meals a day and a breakfast which appears as a matter of form but which he scarcely touches. These may seem small details, but he is a different child as regards health and colour and needs no tempting at all. If he is not hungry for a meal it is passed over without comment. The doctor said, ' Of course I should have suggested this, but I felt sure you could never carry through it, and raw meat is a useful alternative.'

" I have been asked what substitute I used for the child that could not take cow's milk. I nursed her a little longer than the other, and as soon as I could I gave her nuts reduced to a perfectly smooth cream as a substitute for the milk. This was done with almonds, and it was made as smooth as real cream."

I have given these letters pretty well in full because they contain a large number of good points. I congratulate the mother on evolving a diet so near to the ideal one for children. I now make some comments on various points mentioned in her letters:—

I quite agree about the great benefits that are conferred on the unborn child when its mother lives on a sensible diet. The omission of tea was an excellent step, for its effects are more injurious than meat.

A very good point is that with regard to the spacing of a child's meals. I do not consider three or four hours as too long an interval between meals for a baby. The spacing of meals has often been used with benefit in cases of wasting due to the child's inability to digest its food, the causes of which are many. It is also most useful in cases of summer diarrhœa. The habit of feeding a baby whenever it cries is a most pernicious procedure for the child, and for the mother as well, because she is rendered more liable to breast troubles. It is often water that is really wanted by a dyspeptic child. Offer it water when it is not the proper time for a meal, and judge by the result.

The omission of all bread is excellent, for it is very acid. (I might say here that the word acid is used in its sense of the opposite to alkaline, and has nothing to do with uric acid. People are apt to confuse acidity with uric acid, whereas there is no connection between the two except in so far as the acidity influences the excretion of uric acid from the body.) The high acidity of bread is very apt to make a child retain its uric acid, which means trouble in the future. The omission of sugar is also beneficial, for it is very acid and in addition has deleterious effects on the teeth.

Thorough mastication is very important from several points of view:—(1) More efficient and thorough assimilation of the food is ensured; (2) it is good exercise for the teeth and assists in their preservation, especially when hard food is eaten; (3) in young children it conduces to the formation of sound healthy second teeth, which so often actually come in decayed nowadays. An eminent London dentist has stated that chewing hard food promotes the circulation in the pulp of the teeth and so aids in their preservation; he has noted that the fact of living on "clean" foods (*i.e.*

uric-acid-free) is a potent preventive of decay; he also says that there is no need for such "clean" feeders to brush their teeth more than once during the twenty-four hours. The state of the teeth of the present-day children is truly deplorable. At the present rate man will soon become a toothless animal. Can this be due to the fact that man is making his frugivorous teeth perform the functions of the teeth of the carnivora, for which comparative anatomists tell us they are utterly unsuited, both in structure and in shape (see *Diet and Food*, 6th Ed., pp. 87, 88 and figs. 6 and 7)?

Children are so often anæmic from overfeeding on the wrong kinds of foods. A little wholesome starvation is excellent treatment for the overfed child. The apparent increase of anæmia among children at school is, I venture to think, due to the concurrent increase in meat-eating and tea-drinking.

Mothers have asked me whether gravy was not permitted because it was not meat! The gravy is the worst part, for it has next to no nourishment and moreover contains a larger proportion of the harmful uric acid than the meat itself.

The rapid and clean healing of wounds is a marked characteristic of those who have lived for some years on uric-acid-free lines; it is but one indication of the improvement in the general circulation of the body.

Baked potatoes are to be preferred to the customary boiled potato for several reasons, not the least of which is that none of the valuable nourishment and alkaline salts go down the sink, which is always the case when potatoes are boiled in the usual manner. In addition the baked potato is more easily absorbed, and, owing to some of the water having been evaporated in the process of cooking, is more nourishing.

Drinking during meals is a bad habit for everybody. Fluid should be taken either quite at the end of a meal (*e.g.* if it is milk) or else between meals, but not nearer than half an hour before a meal. Fluid drunk during a meal dilutes the digestive juices, so that indigestion is very apt to be started with the whole host of childish ailments in its train, such as fermentation, flatulence, malnutrition, rickets, stunted growth, etc. Too much fluid, as well as other errors in feeding, is very often at the bottom of these ailments.

A child's fluid so far as possible should consist of fresh fruit juice almost exclusively. In this way the troubles due to hard water can be avoided; if the child has to take water for some reason or other, be sure that it is distilled (*see* note on hard water on p. 148).

The suggestion about biscuits made of nuts and flour is an excellent one, and the larger the proportion of nut they contain the better, for the wheat is rather acid. They can be made most inviting and are a convenient form in which to carry a nourishing meal when away from home.

The restriction about salt should not be too strictly enforced (*see* p. 66). However, if the child is having a large quantity of nuts it will most likely be getting enough sodium chloride. Children who do not take nuts to any extent should be given salt.

I quite agree about training children to monotony of diet. The stimulating dietary (meat, fish, eggs, soup, tea, etc.) of the modern child must, I am sure, have something to do with the noticeable lack of stamina they appear to exhibit, because, as I explain elsewhere (p. 155), stimulation means living on capital instead of income, so that such children have no reserves. At no time are the reserves more urgently needed than when the child has to contend with the effects of living on uric-acid-containing foods. I attribute the great increase of late years in cases of appendicitis among small children to the effect of uric acid, and its so often fatal termination to the exhaustion of the child's reserves brought about by the stimulating diet. It is to be noted that the appendicitis occurs chiefly among the children of the richer classes where the most injurious foods are all the present vogue. The increase in stature of the rising generation is also due, I think, to the same factor—namely the excessively stimulating diet. Growth from stimulation is not well founded, and is sure to wilt in time of stress.

The rule about not eating when not hungry applies to the child as well as to the healthy adult. A day or two's absolute starvation is an excellent treatment for loss of appetite in the overfed. There need be no fear of a young child dying of voluntary starvation, like some adults endeavour to do, for the child is nearer to Nature, and when Nature says the child is ready for food the appetite will return.

I quite agree with keeping a child in the open air as much as possible, so long as it is properly protected from the cold by plenty of warm clothing. Bare legs and arms may look nice, but are excessively bad for the child and should never be permitted. The evils of underclothing a child I have already mentioned on p. 128.

Almost the only criticism I can make against " M. Lenorme's " most instructive letters is to express a doubt as to whether the children were really getting enough proteid. This may not hold water, as they were having plenty of nuts, but as no weights or quantities are stated, it is rather difficult to judge. The blood colour (*see* pp. 59 and 144) would be a guide as to whether a child was getting enough proteid, as it would be low if the child were underfed, and would remain at the highest colours if the child were absorbing its proper allowance of proteid, supposing it lived on uric-acid-free foods.

I should prefer " Seconds " flour to the Artox flour, because of the absence of the husk, which is harmful (*see* p. 24).

I came across recently an interesting case of a mother, who, living herself on a natural diet, was attempting to bring up one of her children on the same lines. Her enterprise was very praiseworthy although she made some serious errors. I give the case somewhat in detail in the hope that others may learn from her errors and be prevented from making the same mistakes, when they follow her otherwise excellent example.

The child was 2½ years of age, height just over 3 ft. and weight 32 lbs. A fine specimen of a child brought up on a natural diet from birth. The only indication that things were not quite as they should be was the blood colour, which was too low, being only .8 instead of 1.0 or over.

The details of its food were as follows:—

Breakfast: 8 *a.m.*
1 mashed banana.
2 home-made Artox rolls.
1 Crispit biscuit.
4 oz. almond milk.

Dinner: 12.30 *p.m.*
2 mashed bananas.
Date and almond paste made of 4 dates and 4 almonds.
An apple, if still hungry.

Tea: 5 *p.m.*
The same as breakfast.

The almond milk consisted of 6 almonds pounded to a paste in a mortar and made into a smooth cream with 4 oz. warm water. The Artox rolls were made of 1 lb. of Artox flour, 1 oz. olive oil, ½ pint of water, and 2 oz. sultanas. Two Artox rolls and one Crispit biscuit weighed 4½ oz. The date and almond paste weighed 1 oz.; the dates having the pithy fibre removed before pounding.

The grave error made here is deficient quantity, for on the most liberal estimate the above diet gives only 439 grs. of proteid. Now by the table given on p. 130, a child, aged 2½ and weighing 32 lbs., requires 32 × 10 × 3 = 960 grs. of proteid per day, so that this child was getting less than half its proper amount of proteid.

So far as quality is concerned, the diet is quite an excellent one, with the exception of the wholemeal of the rolls and biscuits; though I do not consider any cereal food, excepting rice, suitable for a child, because of its high acidity.

On inquiry the mother seemed to think that the 16 almonds (½ ounce roughly) contained quite an extraordinary amount of proteid; in fact she was not quite sure that the child was not getting too much proteid!

The mistake that is made very frequently, especially in the case of a child, is that of using too little proteid in the daily food. It is easier to make in the case of a child, because a person is very apt to forget that the child is growing and increasing in weight, and that allowance should be made for the increasing weight by increasing the proteid quantities to correspond. A very good rule is to weigh the child every week and for each pound that it has increased in weight add the equivalent number of grains of proteid to its daily total for the next week. If this rule is strictly adhered to, there will be no danger of the child being underfed, provided that it is having its correct proteid quantities for its age (*see* the table on p. 129).

Amongst other things this case gives a very good example of the value of the blood colour as an index of the state of the nutrition, for, with the exception of the deficient blood colour, the child was a fine specimen.

CHAPTER VIII

GENERAL NOTES

THE SOCIAL DIFFICULTY: WHAT TO DRINK: DIET FOR THE POOR: FATIGUE: ATHLETICS

GOING out into society, dining out and staying with friends often present difficulties to the beginner as well as to those who have been on Diet some time. What I do myself, on going out to dinner, is one of two things, depending on whether the host and hostess know about my diet or not: if they do, then the course to take is obvious. If they do not, I usually take something before I leave home, say ½ pint of milk, some cheese or white of egg (in fact the " A " foods of one's dinner), and then when I get there I eat what I can and play about with the rest, hiding the poisonous things under the knife and fork! This, of course, is not pleasant, but the matter has got to be faced out. Staying with friends who know about the Diet is, of course, easy; but with those who are not intimate I take a 1 lb. packet of " Cow and Gate " dried separated milk in my luggage. One can usually obtain bread, cheese and milk, so with dried milk to fill up deficiencies in case of need, I can get along very well. Of course, this entails making oneself more or less of a nuisance to one's friends, but still it can't be helped. This way of managing is, I think, much better than breaking out and taking meat and fish occasionally; it is decidedly better for the health to be absolutely strict about Diet (*see* p. 65). After all, it is worth taking a great deal of trouble in order to obtain and keep good health. This is a serious drawback to Diet from the social point of view, and those who go out a great deal simply have to make a choice between good health and society. This problem must be faced so long as society in general persists in feeding in a manner so detrimental to its health (*see* p. 94). The best way is to try to convert one's friends not by argument but by results, for if they see how much one's health has improved on Diet, they will very likely be anxious to do the same.

When travelling abroad it is quite easy to get all that one requires, easier in fact than in this country, but any deficiencies can be made up by taking with one a packet of dried milk, a supply of Mrs. Hodgkinson's excellent rice and dried-milk biscuits (made with nut oil and obtainable from Shearn's, Tottenham Court Road, W.C., under the name " Ricemilk " biscuits) and some nuts. Most of the big liners will provide special diets if notice is given to the purser or head steward beforehand, when a few instructions to the *chef* will put everything right. I have experienced no difficulty in this respect on the P. and O. liners and others. I usually have a supply of *Some Recipes for the Uric-Acid-Free Diet*, a copy of which I give the *chef*, together with a list of the articles not permitted, and tell him to give me so many whites of egg a day as well as other dishes. Curd I do not trouble about on these occasions, as I make up for its absence with cheese.

I am often asked to suggest a substitute for tea, coffee and cocoa. Postum, an American preparation of roasted cereals, is quite good, or Life-belt Coffee, from which the caffein has been extracted; it is, however, not absolutely uric-acid-free, as my experiments with it have shown. Simple hot water makes an excellent drink with or without milk or cream; I fancy I can hear the tea-drinker snorting with indignation on reading this last! But really hot water is quite good when one's palate becomes more sensitive as the result of Diet, and can appreciate more delicate flavours. Horlick's Malted Milk is also a good beverage. When you are really thirsty water is delicious, and why drink at all when you are not thirsty?

This increase in the sensitiveness of the palate after being on the Diet for some time is quite remarkable, for foods that the meat-eater characterizes as tasteless and uninteresting appear to acquire delightful and delicate flavours of their own. Curd is usually placed under this ban at first. I must say that I myself used to call curd "tasteless muck," but now I enjoy taking it quite alone with nothing else to help it down, as I used to have years ago, and I have always been a dainty person about my food (*see* also p. 9).

Personally, my fluid consists usually of milk, during the winter only a pint of milk, with a little water occasionally if there is *real* thirst for it, otherwise this is all I take in the form of fluid during the cold weather.

During the summer and hot weather milk again is my chief fluid with the addition of soda-water. Cider also occasionally or a little white wine for a change. Living on two meals a day, as I have for the past four years, I omit breakfast and tea, so there is no need for me to find a substitute for tea, etc., but whenever I do take breakfast, as when occasionally it is more convenient to have breakfast in place of lunch, I simply take milk cold in summer and hot in winter.

Hard water, owing to the calcium it holds in solution, is a retentive and tends therefore to make people store uric acid. Soft water should be drunk by those who are at all inclined to retain uric acid, especially the gouty and rheumatic living in hard water districts. An excellent soft table water is Salutaris, a pure distilled water obtainable, either aerated or non-aerated, made by the Salutaris Water Co., 236 Fulham Road, S.W. I would recommend those who cannot obtain Salutaris to buy a " Gem " still, obtainable from the Gem Supplies Co., Ltd., 67 Southwark Street, London, S.E., and make their own distilled water at home.

Those who take plenty of fruit and vegetables require very little fluid beyond what they get in these and the milk. Pure fruit juice, freshly made, is to be recommended as a drink in hot climates and in summer when fruit is plentiful. Eating fruit will often do in place of a drink except in very hot weather.

I am often asked whether it is advisable to try and live on uncooked food. As a general rule I am against the use of uncooked food to any extent. Of course, fruit and nuts are best eaten raw, but beyond these and except for special purposes, such as constipation, I advise that all other food should be cooked before eating. All unripe fruit should of course be cooked. Uncooked food taken in any quantity is very apt to cause diarrhœa with the consequent sweeping out of nourishment, causing thereby a fall of urea owing to the food being removed before it can be digested. (*See* p. 60.)

Cooking is advantageous because it increases the digestibility of vegetable foods (cereals, etc.) as it causes the starch to swell and burst the cellulose envelope, thus enabling the digestive juices to get at the cell contents more easily, for the cellulose is very resistant to digestive action. Cooking, on the other hand, diminishes the digestibility of animal foods. In addition, it destroys all parasites and fear of bacterial infection, such as typhoid, etc.

I have heard it said that boiled milk is more indigestible than raw milk; I do not think this is borne out by facts. Milk that cannot absolutely be depended on should be pasteurized, especially for children.

Raw vegetables, pounded up in a mortar, are excellent as a corrective for constipation.

Of course, in the Ideal Diet of nuts and fruit there is no cooking, but it is rare nowadays to meet anyone who can live entirely on his natural food. Many can live well at some stage between Beginner's Diet and the Ideal Diet, that is to say, the proteid that they are unable to get entirely from the nuts and fruit is made up from curd, cheese, white of egg or dried milk; as they improve they will generally be able to use more nuts and less of the foods derived from the animal kingdom. *See* the "Ideal" Diet given at the end of Appendix II.

Diet for the Poor

The question often arises whether the Uric-Acid-Free Diet is possible for the poor from the point of view of cost. From the point of view of the largest amount of proteid for the smallest outlay Meat Diet is the most expensive, the Uric-Acid-Free Diet comes next, and the Vegetarian Diet is the cheapest. Although the last is the cheapest in prime cost, I venture to assert that the difference in cheapness between the Uric-Acid-Free and the Vegetarian Diet would be more than balanced by the improved health gained by the former with consequent less outlay on, and loss of time to the wage-earner owing to illness. In addition, what makes the Vegetarian Diet cheaper than the Uric-Acid-Free Diet is the cheapness of the pulse foods, but this is largely discounted by their comparative indigestibility (*see* below).

I now give a table showing how much proteid the outlay of 1d. in the purchase of the chief foodstuffs in use at the present day can buy at retail prices, giving the uric-acid-free foods along with the uric-acid-containing foods for purposes of comparison.

	grs. of proteid
* With pulses at 3d. per lb. one penny will buy	533

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* Signifies containing uric acid.

	grs. of proteid
With skim milk at 1d. per quart one penny will buy	524
,, dried separated milk at 6d. per lb. one penny will buy	373
,, bread at 3d. per 2 lb. one penny will buy	360
,, flour at 11d. per 7 lbs. one penny will buy	473
,, cheese at 8d. per lb. one penny will buy	280
* ,, meat at 6d. per lb. one penny will buy	266
* ,, fish at 4d. per lb. one penny will buy	240
,, potatoes at 9d. per stone one penny will buy	192
* ,, eggs at 1d. each one penny will buy	120
,, dates at 2d. per lb. one penny will buy	64
,, bananas at 4 a penny one penny will buy	64
* ,, tea at 1s. per lb. one penny will buy	0

Referring to the under-nourishment of the poor in New York, Bulletin 116, U.S. Dept. of Agriculture, p. 76, says:—"There was scarcely one case in which it was not easily possible, by a more judicious selection of food materials, to get more nutriment for the money expended than was obtained."

In some parts of the country skim milk can be had for ½d. per quart, in which case a penny would purchase 1048 grs. of proteid. Pulses, it will be noted, contain only slightly more proteid for one penny than skim milk,

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* *Ibid.*

and, as skim milk is uric-acid-free, the advantage lies with the latter. In addition to this from 10-40% of the proteid in pulses is not absorbed in the body, this depending on how the pulses are cooked and whether eaten ground up or whole. Milk is absorbed more easily than any other food, so clearly the advantage lies all on the side of skim milk.

The other food that Vegetarian Diet permits and which the Uric-Acid-Free Diet does not is eggs, and here the prohibitive cost must rule these out, still more so when only the white of egg is permitted, for then a penny would purchase only 60-68 grs. of proteid. The Vegetarian Diet permits tea, which, it is seen, contains no proteid, so that from the point of view of nourishment money expended on tea is absolutely wasted.

I will now work out a diet on uric-acid-free lines for a working man weighing 11 st. net, allowing him 11 grs. per lb. for very heavy work. He will require 1694 grs. of proteid per day. This he can obtain at a cost of 5.00 pence per day as follows:—

	proteid	cost in pence
2½ pints separated milk at 1d. per quart . .	655	1.25
2 oz. dried milk at 6d. per lb.	280	0.75
1½ oz. cheese at 8d. per lb. .	210	0.75
1 lb. white bread at 3d. per 2 lb. loaf . . .	544	1.50
2 oz. margarine at 6d. per lb.	—	0.75
	1689	5.00

This diet could be cheapened by substituting home-made bread for the baker's loaf: taking flour at 11d. per 7 lbs. and ¾ lb. of flour as making 1 lb. of bread, a saving of 0.3 of a penny could be effected; also where separated milk was ½d. a quart a further saving of 0.6 of a penny could be made. This would make a total saving of 0.9 of a penny, bringing the total cost per day to just 0.1 of a penny over 4.0 pence. Or by substituting extra separated milk for the dried separated milk a further saving could be effected; by so doing the amount of fluid would not be excessive, considering the hard bodily labour, which would entail a good deal of perspiration.

Quite a good way of using the skim milk is to allow some of it to turn sour and then, by draining away the whey, to make a home-made cheese. Keep a small piece over to be added to the next day's skim milk, and so on.

Fatigue

It is really extraordinary how common fatigue is nowadays and how very soon the average person seems to get fatigued and in a degree quite disproportionate to the exertion. This feeling of fatigue and lassitude is especially noticeable in the morning when after the night's rest a person should be feeling refreshed and fit. As the day goes on this feeling improves until in the evening people often become as lively as crickets. The woman who in the morning is as limp as a rag as evening goes on becomes quite vivacious and alert. Surely rather a paradoxical state of affairs this! To anyone who understands the action of uric acid the explanation is obvious. Fatigue is synonymous with excess of uric acid in the blood: a person in this condition will tire easily, but clear the blood of uric acid and the fatigue will disappear. This fact explains the exemption from fatigue that those on the Uric-Acid-Free Diet enjoy, for owing to their diet little or no uric acid is available to come into the blood.

The effect of uric acid on the body is, as Dr. Haig has it, like putting sand into the bearings of an engine instead of oil. It creates a tremendous amount of friction with consequent increased wear and tear, decreased efficiency and shortening of useful life, and quicker relegation to the scrap heap. Fatigue is but one visible sign of the increased friction caused in the body by uric acid. No engineer in his senses would dream of lubricating his engine's bearings with sand, yet this is exactly what most of the British race are doing at the present day. The gradual shortening of the average duration of useful healthy life is a pretty good index of the mischief such folly entails.

The fact that a person on the Uric-Acid-Free Diet suffers from fatigue, except after some unduly prolonged exertion, is in itself proof positive that mistakes are being made somewhere. Put these mistakes right and get rid of the accumulation of uric acid they have caused, and the fatigue will go too.

I cannot illustrate this better than by returning to the subject of tea. The magic effect of a cup of tea on the tired individual is explained by the fact that it clears the blood of uric acid, as will any other stimulant. This accounts for the excessive taking of tea among the lower classes, and for the demand for tea, coffee, drugs, stimulants and pick-me-ups of all kinds among the upper classes. The great cry nowadays is for stimulation to drive away the all-pervading overpowering fatigue that has everybody in its grip; for something to overcome the wearying depression.

Stimulation, except when resorted to for a special purpose and for a short period, is essentially wrong in principle. For stimulation means calling out the reserves of the body, and to do this continually results in exhaustion of the reserves; a serious state of affairs. In other words, stimulation is living on capital instead of income. In addition it means retention of uric acid, a process which, if persisted in, inevitably means disaster, owing to the accumulated uric acid bursting bounds, which sooner or later it is certain to do.

The consumption of tea and coffee per head of the population has risen largely of late years (*see* table on p. 93), and this increase is simply due to the attempt to cope with the increasing demand for stimulation. It is a most pernicious way of trying to overcome fatigue. This is why opium is taken to drive away the depression of the opium-taker, for the action of tea and opium is identical. Methods such as these can but give temporary relief, because the uric acid, though cleared out of the blood, is not cleared out of the body. To take more poison to overcome the effects of the same poison is merely piling Pelion on Ossa, so that the inevitable crash will be all the greater. The uric acid, thus stored up, has added to it the poison from the tea, and remains quiescent, a power potent for evil, until such time as conditions are favourable for its solution. Then it comes into the blood with increasingly severe results and the fatigue and depression are worse than ever. There is no way out in this direction, for the tea, coffee, etc., add fuel to the fire of destruction, since they contain the very poison (uric acid), the action of which in the blood is causing the fatigue. It is a misfortune that taking uric acid by mouth clears the blood of the uric acid already in it unless the blood be in such a condition as to dissolve more uric acid (see *Uric Acid*, 7th Ed., p. 119), so that the sufferer, who feels so much better for his cup of tea, naturally thinks he must be doing right. The only right way is to avoid taking by mouth the poisons which cause fatigue; there is no other way. The ways that appear to be easier and more preferable do not go to the root of matters and lead eventually to an impasse.

The fact that the Uric-Acid-Free Diet is a less acid and therefore a less stimulating form of diet than the usual Meat Diet accounts, I think, to some extent for the increased strength and endurance of the uric-acid-free feeder, because there is no stimulant present to call upon the reserves which are therefore kept intact until they are required. The chief factor in the noticeable increase in strength and endurance is, of course, due to the absence of uric acid from the food.

Notes on Athletics

Mr. H. Light, who superintends the feeding of all the vegetarian athletes, has very kindly revised this section in accordance with his practical experiences on the track and elsewhere.

Adults in special training for athletics of any kind should follow the same rules as to proteid allowance, but their net weight should usually be multiplied by 11 (*see* Appendix I. p. 196). Generally speaking, the allowance of proteid during training should be sufficient for the special exertion in question without loss of weight or decrease in the blood colour (*see* p. 59). The weight should rather tend to increase and the blood colour, if not at the top at the beginning of training, should rise to the highest point of the colour card (obtainable from Bale, Sons & Danielsson, price 1s.). At the same time care must be taken not to overfeed to such an extent as to cause retention of the uric acid formed during the daily metabolism of the body. A watch can be kept on this last (a most important point it is too, if absolute fitness at the time of the actual contest is required) by taking daily observations morning and evening of the capillary reflux (see *Uric Acid*, 7th Ed., p. 223), and endeavouring to keep the swing between the morning and evening readings within normal limits (*see* previous references, p. 233). The greater the retention of uric acid during training the greater the chance of early fatigue and the correspondingly lessened chances of success.

If an individual is fat before training commences, his weight will fall during the early period of training, owing to the loss of the fat; then later on his weight will commence rising again. At the end of training it is better to be a little overweight than underweight. It is well for the athlete to train hard until he finds that he has reached his best racing weight (a matter he must determine for himself by experience). Then, having reached this stage, he should only take comparatively gentle healthy exercise for a day or two before the race, feeding well (but not overdoing it) during this period. By this means he secures a reserve of proteid within the body, which in other words denotes that all his muscles are extra well nourished. Moreover a short rest from hard training begets a freshness and a greater zest for the struggle, this being especially marked in the case of a man who has overtrained and gone stale, a state of affairs that should be impossible for an athlete who has trained on uric-acid-free lines and has been careful to avoid retention of uric acid during training. Once the stage of staleness has been reached a fortnight's absolute rest is better than continuing with training.

When an athlete is really fit he should feel anxious to be " at it." If his desire flags he is either under or overtrained. The capillary reflux and blood pressure will demonstrate which of the two it is. When overtrained the capillary reflux will be abnormally slow and the blood pressure high, whereas the capillary reflux in the undertrained man will be too slow, and the blood pressure low.

During the period of training care must be taken to see that sufficient rest and sleep are obtained; 8-9 hours of sleep per day should be the minimum. You cannot expect to do good extra work without extra sleep and rest also.

Those living on the Uric-Acid-Free Diet are practically in the position of the trained man, for, owing to the excellent circulation, the muscles are absolutely fit and only need adaptation to the special form of athletics required. Of course more training will be required for long-distance events, calling for prolonged endurance, in order to increase the strength of the muscles, but the uric-acid-free feeder will always have the pull over the meat-eater because of his better circulation; and, so long as there is a sufficient supply of suitable proteid, he will be able to do more with less effort than the meat-eater, especially in long-distance events. Provided he has sufficient proteid he will not tire so soon, for the uric-acid—the cause of fatigue—will be absent; moreover he is not nearly so likely to strain or injure himself as the meat-eater, should the contest be very strenuous. In fact the uric-acid-free feeder scores all along the line, for he has less "sand and friction in his bearings" (*see* pp. 100, 188).

It must be remembered that exhaustion or fatigue in a properly-trained subject arises from two main causes:—(1) Lack of sufficient and suitable nourishment; (2) excess of uric acid in the blood. The capillary reflux and blood pressure will distinguish between the two (see *Uric Acid*, 7th Ed., p. 326 and previous references). The properly-trained uric-acid-free feeder should experience the first solely, and that only when his proteid reserves have not been kept up to the mark. This is where the uric-acid-free feeder scores over the meat-eater—his chances of having to fall out from fatigue are halved.

A great deal must be left to the individual athlete; he must find out by experiments on himself which of the two main causes of fatigue is the one affecting his case. Of course fatigue in the case of an athlete who is not a uric-acid-free feeder might be due to a combination of the two chief factors. However an athlete should never run away with an ideal, and by straining after this blind himself to palpable facts.

Stimulation in any form should be avoided. Those who are really uric-acid-free will not require it (unless they are short of proteid), because the call for stimulation means the onset of fatigue which is synonymous with excess of uric acid in the blood. In long-distance events, race on food as long as the digestive organs permit, and call up your reserves with stimulants only when digestion gives out.

However when stimulants *have* to be taken, be careful not to take them too early in the contest, for you will be calling up your reserves too soon, so that they may run short before the end. Stimulation, when there are no reserves of strength left in the body, will have no effect. Besides stimulation means retention of uric acid, and so, if resorted to too soon, may cause the corresponding collæmia (excess of uric acid in the blood) to appear before the end of the contest, with consequent rapid increase of fatigue, necessitating further and more vigorous stimulation which may fail to overcome the collæmia, so that the competitor has to drop out. Had stimulation been resorted to later, the corresponding collæmia would not have supervened till later. So when you *must* stimulate do so well on in the contest, in order that the rebound may follow the finish. I certainly should not advise the use of any stimulant that contained uric acid, such as tea, for the chances are that collæmia will come on the sooner and be the more severe.

As regards feeding on the day of the contest, for short-distance events it is advisable to take no food within at least three hours of the race, in order that digestive work may be finished and the heart able to devote all its strength to the contest without the handicap of having to perform digestive work as well. All digestion means increased work for the heart, as an extra quantity of blood has to be pumped to the digestive organs. Starting too soon after a meal often means stoppage of digestion, vomiting of the undigested remains, with consequent loss of power owing to stoppage of supplies. An empty stomach is best and essential for sprinting, for all the energies must be devoted to the contest and cannot be wasted in digestion.

Long-distance events demand a different procedure. Here the energy has to be divided between, (1) the purposes of the contest itself, and (2) providing sufficient and suitable supplies of nourishment to keep up endurance. Individual experiment is the only means of determining the exact proportion in which each person must divide his energy to obtain the best result. So for long-distance events the last meal should be about two hours before the start and should consist of easily-digested proteid in as concentrated a form as is possible, consistent with the proper digestion of it.

With reference to feeding during a long-distance event it is better to have too much food than too little. " Starved men like starved fires take a long time to revive." The correct procedure is, I think, " little and often," endeavouring as far as possible to keep the energy required for digestion at a fairly constant level. The long-distance man has to be warned against the " hungry knock."

Owing to the loss of fluid by perspiration the foods taken during a long distance should be of a semi-fluid nature. Sloppy milk puddings, milk, white of egg, etc., produce the best results.

CHAPTER IX

DIET IN DISEASE

TEMPORARY MODIFICATION OF DIET IN TREATMENT OF DISEASE: TWO MEALS A DAY: REDUCTION OF FLUIDS: CONSTIPATION: OBESITY: EXERCISE

IT must be understood that Diet as used for treatment of disease is quite distinct from Diet used for persons in good health. The two must not be confused on any account. Diet in disease is always modified to suit the particular conditions demanding it, and must be adhered to only so long as these special conditions last. Diet in disease is a treatment of disease, and, like drugs or any other special treatment, is only continued so long as there is call for it. This distinction cannot be too strongly insisted upon, as so many errors are made by patients who carry on with the special modified diet too long, with consequent harm to themselves. As an instance of this, a patient is told to take an alkaline diet and no salt for a month, and then to return at the end of that time to see the results; the patient does not come back then, as he had been told to, but returns in twelve months' time in a neurasthenic state, saying that he is feeling very weak. On inquiry it is found that he has taken no salt and has continued the alkaline diet since he last saw you, with the result that he has severe dyspepsia, is not absorbing one half of the food he is taking (as shown by his urea), and his heart has been seriously weakened. When asked why he has continued with the no-salt alkaline treatment so long, he says, "Oh, but you told me to do so!" "Quite so," you reply, "but only for a month or so, at the end of which time I told you to see me again, with the intention of making further modifications, as by then this treatment would probably have done all that was required of it." A case very similar to this actually occurred, the patient continuing with the special treatment (in spite of being written to and told to leave it off) just because he was feeling so much better on it, and the results were disastrous. He blamed Diet for his misfortunes when he had only his own folly to thank.

Many of those who change on to Diet do so because they are in ill-health on the ordinary diet owing to a continuous plague of "minor ailments," or even disease may have made its appearance. Provided no organic changes have taken place the change of diet has been made in time, but to leave diet unaltered till organic change due to disease has made its appearance, is in most cases leaving the change till too late. In many such cases the constitution has been so undermined by the evil effects of ordinary diet and such organic changes have resulted, that it is next to impossible to restore them to any semblance of good health. All one can do is to patch up the ruined constitution as best one can, and sometimes even that cannot be done. Diet changes then are quite out of the question, for such a person might easily be killed by any attempt to modify the diet, because of the immense flood of poisons, stored up by many years of wrong feeding, which such changes might set free with disastrous results and deadly force. Diet cannot be expected to achieve the impossible; one might as well expect it to raise the *Titanic* from the bottom of the Atlantic as to hope it will cure some cases that present themselves. It unfortunately cannot perform miracles, though in some cases the results obtained by Diet have been little short of miraculous. So the great maxim is to begin early in life, and the earlier the better if one wishes to enjoy the priceless benefits of good health; I do not mean good health as defined by the modern low standards, but real *genuine* good health, without even a minor ill, such as (let us say) constipation, the " British disease," to cloud the horizon of life.

Patients often expect changing diet to be somewhat like turning over a new leaf and starting with a clean slate, and they are annoyed because it has not cured them in a week or two of all the ills that it has taken years and years on the old diet to produce. Such people are asking for impossibilities and had better make no change. A year and a half to two years or more on strict Diet, keeping all its rules, etc., must elapse before any *real* improvement can be expected. Slight improvement there is before this, and some sufferers obtain great benefit after even a few months on Diet, but generally speaking it will take as long to cure a disease, if it be curable at all, as it took for the disease to develop to its present condition. Still, the cure, when it has been attained, will be a permanent one, so long as Diet is continued. Migraine and Bright's disease, if taken sufficiently early, can be cured permanently by Diet (it has been so in my own case), which is more than can be said of any other treatment at present in vogue, such as the injections of various sera, electric treatment, baths, spas, etc., all of which cure for a time, but permit the disease to return in a worse form. The reason for this is that such treatment does not go to the root of the matter, but merely plays about on the surface of things, treating results and not causes.

I remember the illustration my father gave at a lecture at Baylis House, of the necessity of changing diet early in life if the full benefits are to be obtained. He said (so far as I remember) that every person is faced from the dietetic point of view with two paths starting from the same point and going in opposite directions, (1) the path of wrong diet, and (2) the path of correct diet. For every year that this person goes along the wrong path it will take him as many years to get back to the point at which he started, and he must get back to this starting-point before he can begin moving along the right path; while the quickest and only way to the right path is to retrace his steps, for there is no short cut. In some cases one can never get back to the starting-point, for one has advanced too far along the wrong path, or been too badly injured to return. One cannot, as yet, replace a diseased heart or kidney with a new one; all that can be done in such cases is to patch things up and try to improve the general conditions, and even this is in some cases impossible, if the change has been left till too late. So the earlier in life the change of diet is made the better is one's chance of good health; yet how many are ruined even on the threshold of their lives by rheumatism and heart disease, which Diet entirely prevents.

It therefore comes to this, that the cure of disease by Diet is usually a long, slow and, in some cases, a tedious process; yet Diet is the only treatment that can offer any hope of a *permanent* cure, unless matters have gone so far that cure is out of the question, when all that can be done is to try and ameliorate the conditions by treating symptoms. Practically speaking a large number of patients improve very much in general health after a year or so on Diet, some after only a few months on Diet, although their actual malady may not have been affected much one way or the other.

The general principles governing change of diet in disease range themselves in accordance with the group of diseases under which the complaint falls. These groups are two:—(1) Those due to retention of uric acid, and (2) those due to excess of uric acid in the blood—collæmia. Though some cases show symptoms of both groups merging into one another, the symptoms of retention alternating with those of collæmia, yet most diseases fall pretty definitely into one or the other group (see *Uric Acid*, 7th Ed., p. 132; and *Uric Acid in the Clinic*, p. 6).

Practically speaking all retentive diseases can be put on Diet straight away by the usual process of Stages (*see* p. 39).

The collæmic diseases, by far the larger group, fall under two heads as regards treatment by Diet:—(1) Those in which the disease is simple and uncomplicated by any organic factor, *e.g.* a weak heart, etc.; (2) those in which there is definite complication, such as cardiac debility, kidney disease, etc.

All uncomplicated collæmic diseases (group 1) can be put on Diet at once, following the usual rules (*see* p. 50), though care must be taken to see that the collæmia is not permitted to become too severe so as to run any risk of complications, that is, the amount of uric acid passing through the blood on its way out of the body must not be allowed to assume such proportions as to threaten injury to the heart.

As regards group 2, all cases of complicated collæmic disease falling under this head cannot usually be put on Diet at all, with the exception of Stage I., until the complicating factor, say it may be a weak heart, has first of all been treated by two meals a day on ordinary diet, reduced fluids, rest, etc. When the heart has, if possible, been made strong and up to its work, then, and not till then, can any thought of complete diet change be entertained. In such conditions sometimes even Stage I. cannot safely be attempted, because even this makes the collæmia too excessive for the already weakened heart. Any attempt to change diet beyond Stage I. will only make the patient worse and may end in disaster.

As examples of the above I will take the Diet treatment of the two kinds of arthritis:—

(1) A retired Army man, who lives, and has lived, well, whose blood colour is good, heart strong, good appetite, etc. This kind of arthritis is a retentive disease and therefore can be put on Diet straight away by Stages, and will do well and obtain benefit pretty quickly.

(2) A girl of 20, anæmic, no appetite, neurasthenic, heart weak and failing. With this kind of arthritis diet cannot be altered, maybe, for years, if at all, with the exception of Stage I. First of all the heart must be strengthened by rest, reduced fluids, etc., and feeding up on whatever food the patient can be got to take, and, so long as she can be got to take sufficient proteid, it does not matter from what source she obtains it, let it be meat, fish, etc., if she prefers it. When the heart has been strengthened, the blood colour improved and the appetite keen, then change of diet may begin, but not before this first step has been made good, otherwise only failure, possibly death, will result. Change of diet too soon in such a case would only make her worse by increasing the collæmia which would overpower the already overworked heart, and she would go from bad to worse. The collæmia must be temporarily cleared up and the heart strengthened by the above means, and when the heart has become strong, then change diet. The collæmia must be overcome temporarily to allow of her being strengthened, and then Diet will remove the cause of the collæmia, but special care must be taken that she be carefully watched

during the early months on Diet, for the slightest thing might bring on the collæmia too strongly and the heart would become affected again and the whole process would have to start afresh. Never mind about the arthritis beyond local treatment, till the heart has been strengthened; the joints will improve to a certain extent along with the improvement in the general health, but any real improvement cannot be expected till some time on Diet has elapsed. When changing diet in such cases, the aim must be to get a diet that is of small bulk and easily digested, one also with a very little bread in it so as to avoid fermentation and flatulence, which are potent causes of embarrassment to a recently-recovered heart.

The capillary reflux gives the diagnosis between the two kinds of arthritis I mention above (see *Uric Acid in the Clinic*, p. 254).

Deficient appetite must usually be taken as a contra-indication to changing diet too early, because the cause at the root of the deficient appetite is very often a defective circulation, caused by uric acid embarrassing a rather weak heart, which, of course, only tends to make matters worse, by increasing the congestion of the whole of the digestive organs, which, when they are in this congested state, cannot be expected to do good work. Relieve the congestion by getting the heart up to its work and then change diet by Stages, avoiding a bulky diet, which only tends to increase the dyspepsia due to cardiac debility.

The two-meal-a-day plan is ordinarily used as a treatment of disease. But I live on two meals a day for several reasons: given in the chapter on my Personal Experiences.

The best hours for meals on the two-meal-a-day plan are 11.30 a.m. to 12 noon and 7-7.30 p.m. In this country the hour for the first meal is practically unattainable unless one has leisure, but of course abroad it is quite easy, as it corresponds to the time of the French *déjeuner*. Ordinarily 1 p.m. and 7.30-8 have to be the hours. City and business men, who are away from home at lunch-time and unable to get exactly what they require in the city, often arrange to make breakfast and dinner the two meals of the day with a little fruit at the usual luncheon hour. This arrangement of meals is not so satisfactory as when lunch and dinner form the two meals, because the interval between the last meal at night and the first meal next day is not as long, and the longer this interval is the better, care being taken of course to keep the other interval at least six hours. Say the evening meal finishes at 8.30 p.m., allowing three hours for digestion, there remain fourteen hours of absolute rest for the whole of the internal economy, especially the stomach and intestines, and most of all the heart. This is where the great value of the two meals a day as a treatment of disease comes in. Every meal means extra work for the heart, and in a case where the heart is weak this is a serious matter; and the system that can give such a heart fourteen hours' rest in the day from the labour of digestion has much to commend it, for these labours of digestion are a serious tax on the strength of an already overtaxed heart. The usual argument against the two-meal-a-day treatment for a badly-compensated heart is that the extra bulk of the meals must entail extra strain on the heart, and that more harm might be done by this extra strain than could be made up for by the prolonged rest. This argument is not borne out in practice even when the total bulk of food on two meals is the same as on three meals a day, *i.e.* the actual bulk of each meal is greater on two than on three meals a day; but it is customary in bad heart cases to reduce the bulk of the meals by giving more concentrated foods, so that the bulk of a two-meal-a-day meal can be made even less than the bulk of a three-meal-a-day meal. Strictly-reduced fluids are of the greatest use in such cases.

Ordinarily the first meal on two meals a day consists of breakfast and lunch being combined into one meal ("Brunch" as it is called), dinner being kept much the same as it was before on three meals a day. A person is naturally hungrier for the first meal of the day after the long interval and is able to eat more, so it is but common sense making the first meal of the day larger than the second.

There are two ways of changing from three meals a day to two meals a day:—

(1) To decrease gradually the breakfast, adding on to lunch what has been taken off breakfast, till breakfast becomes non-existent, and taking three weeks or so to complete the change.

(2) To leave off breakfast all at once, staying in bed and taking the first meal at 11 a.m. say, a com-

bined breakfast and lunch (Brunch), the second meal being taken six or seven hours afterwards. Then gradually shift "Brunch" back to the usual hour for lunch, taking as long over this method as over the other, namely about three weeks. The second meal will also be shifted back as "Brunch" is, so as to preserve the six-hour interval between meals.

Taking Beginner's Diet as given on p. 47, I will show how to convert the three meals given there into two meals.

The Beginner's Diet is as follows:—

	grs. of proteid
Breakfast.	
2 whites of egg	136
3 oz. potato	24
1 oz. pudding	34
½ pint of milk	131
	325
Lunch.	
2 whites of egg with 1 oz. toast	170
5 oz. potato and vegetable	40
Curd from 1 pint of milk	230
2 oz. pudding	68
3 oz. fruit	24
½ pint milk	131
½ oz. dried milk	65
	728
Dinner.	
Curd from 1 pint of milk	230
4 oz. fruit	32
Carry forward,	262

	grs. of proteid
Brought forward,	262
4 oz. potato and vegetable	32
½ pint of milk	131
½ oz. dried milk	65
	490

Total proteid = 1543 grs. per day.

It would be quite easy just to combine breakfast and lunch together into one meal, but I will suppose that the cutting down of bulk is all-important.

The principle to be adopted here is to reduce the bulk of the foods taken at lunch and dinner, and substitute sufficient proteid in the form of high value proteid (" A " Foods) foods in order to make up for the omission of breakfast and the loss due to the reduction of bulk. Now in order to reduce bulk at lunch I will knock off the 1 oz. of toast, the 2 oz. of pudding, 3 oz. of fruit and 1 oz. of potato and vegetable, making 7 oz. knocked off altogether of a proteid value of 134 grs. Off dinner I will knock 4 oz. of potato and vegetable, 32 grs. of proteid. These with the proteid value of breakfast, 325 grs., make a total of 491 grs. of proteid to be obtained from the highly-concentrated foods. To lunch I will add the ½ pint of milk from breakfast made into curd, 1½ oz. in bulk and 115 grs. proteid, and 1½ oz. of dried separated milk, 195 grs. of proteid. Of this last I would make 1 oz. into a thick paste with a little of the milk and add the remaining ½ oz. to be stirred into the ½ pint of milk together with the ½ oz. of dried milk that was already in the meal, thus increasing the bulk by 1 oz. only, which with the 1½ oz. of the curd makes a total increase in bulk of 2½ oz. This makes a total decrease in the bulk of lunch of 4½ oz. and the addition of 310 grs. of proteid.

Lunch will now be as follows:—

	grs. of proteid
2 whites of egg	136
4 oz. potato and vegetable	32
Curd of 1½ pints of milk	345
1 oz. dried milk made into a paste	130
½ pint of milk, with	131
1 oz. of dried milk stirred in	130
	904

Out of the total of 490 grs. of proteid to be obtained, 310 have been made up at lunch, leaving 181 to be added on to dinner. To dinner I will add the two whites of egg from breakfast, 136 grs. of proteid, leaving me with 45 grs. still to be obtained. This I will get from ½ oz. of dried milk to be added to the ½ oz. of dried milk already there and stirred into the milk. The increase in bulk will be 2 oz. for the white of egg, and as 4 oz. of bulk have been knocked off, the net decrease in the bulk of dinner will be 2 oz. and the increase in proteid will be 201 grs.

Dinner will now be as follows:—

	grs. of proteid
2 whites of egg	136
Curd of 1 pint of milk	230
4 oz. fruit	32
½ pint of milk, with	131
1 oz. of dried milk stirred in	130
	659

Total proteid = 1563 grs. per day.

It will be seen from the above that the three meals have been converted into two meals with an actual decrease in bulk at lunch of 4½ oz. and 2 oz. at dinner, making a total decrease in bulk of 6½ oz. I should not like to live on two meals such as the above myself, but when one is ill one has to do many things one does not like. It is to be noted that the total fluids have been reduced to 1 pint in the whole day, so that we now have a two-meal day of small bulk and reduced fluids.

The two meals a day and reduced fluid treatment can be used just as well when a patient is on ordinary Meat Diet. In fact in heart cases where it is impossible to change diet, with the exception of Stage I., the first thing to do is to put them on to two meals a day with reduced fluids, provided sufficient proteid can be obtained in the two meals without the patient being bothered by the bulk of the meals.

The rationale of the reduced fluid treatment is almost self-obvious, but some people do not seem to have quite grasped the why and wherefore. It amounts to this:—every drop of fluid that is taken into the body has to pass through the heart before it can be passed out of the body (1) by the lungs as the vapour of the breath, (2) by the skin as the sweat, and (3) by the kidneys as the urine. It follows from this that the more fluid one takes the more fluid has to pass through the heart, and so the more work the heart has to do pumping all this fluid through the circulation on its way to the excretory organs. Consequently the less fluid one drinks the less work the heart has to do. The advantage of this in cases where the heart is weak or failing is enormous.

Less work means more rest, and rest is one of the greatest therapeutic agents we have. A weak or badly-compensated heart means that every other organ in the body is ill-nourished and unable to carry out its functions properly, so that treatment which can in any way mitigate the strain upon an already overworked heart is of the greatest importance. Lessening the strain on the heart means that it becomes smaller and obtains the mechanical advantage of a better grip of its work, and in addition the decrease in size means that valves that were incompetent, owing to the dilatation, now become competent. In practice, both reduced fluids and two meals a day bring about diminished work for the heart, with corresponding benefit to the patient.

The rules governing the reduced fluid treatment are as follows:—

(1) TAKE NO MORE FLUID THAN *GENUINE* THIRST COMPELS

So many people drink merely from habit; they don't drink because they are thirsty, but because it is time for a drink. Ask such people if they are ever *really* thirsty, and they cannot say that they are! Some people are following the pernicious doctrine of the " Washing Out Plan " (*see* " How much Fluid does the Body Require," by A. Haig, M.D., *British Medical Journal*, 24th April 1909), with the erroneous idea that the excess of fluid is washing out waste products! Others take hot water in the morning for the bowels, etc. etc.

(2) TOTAL FLUIDS MUST NOT EXCEED 30 OZ. (1½ PINTS) IN THE 24 HOURS

In severe cases 1 pint, or even ½ pint, in all, can be ordered for a time with great benefit. Junket is regarded as fluid, as also are milk, soup, fruit juice and anything else that can be made potable.

During winter and cold weather one pint a day can be managed easily. In hot weather, after exercise or getting hot, more fluid may be required, but take *genuine* thirst as your guide. Try and appease your thirst by (*a*) taking a little fruit, (*b*) washing out your mouth, or if these fail (*c*) by taking a sip or two of water.

(3) ALL FLUIDS MUST BE TAKEN AT THE END OF A MEAL

In most people the habit of restricting fluids is soon acquired in the course of a week or two, but there are some who never seem to get accustomed to it and always find it difficult.

A further development of the restricted fluid treatment is the Schroth cure, as carried out in Germany to-day (see *The Schroth Diet-Cure*, by Dr. S. Möller, Standring & Co., London). Modifications of this can be easily made by only doing the complete Schroth on 2-3 days a week, the other days being on ordinary food, or the arrangement of fluid on the Schroth can be adopted on full Diet. (See *Hunger and Thirst*, by A. Haig, M.D., Bale, London.)

Constipation, the so-called "British disease," seems to be a bugbear to many people during the early stages of Diet, especially if their fluids have been reduced. Personally I find no difficulty whatever in this respect, although I am on comparatively short fluids and take much of what are usually considered constipating foods, such as milk, curd, cheese, white of egg, etc. But I am a large butter eater and a pretty good hand at vegetables and fruit, so no doubt these account for my not being troubled with constipation.

It is much better to treat constipation by dietetic means than by drugs, unless absolutely compelled to do so, for the use of drugs is very apt to lead to a drug habit, and in any case tends to cause irritation and dyspepsia.

The chief dietetic means for regulating the bowels are as follows:—

(1) *Lubricants:*

Butter, nut-butter, olive oil, nuts or any kind of grease or fat.

(2) *Irritants:*

These excite peristalsis owing to the large amount of indigestible refuse they contain.

Vegetables both cooked and raw, fruits, especially figs and prunes, and nuts.

If a little of each of these be taken every day there should be no difficulty about constipation. Olive oil or butter should be taken plentifully with potatoes, vegetables and salads, and if necessary an extra tablespoonful or more can be taken as a medicine last thing at night, with a little wine or something else to cover up the taste if this is objected to. When taking olive oil in this manner, care must be taken to wash the mouth out afterwards so as to get rid of all the taste, as the taste of oil left in the mouth sometimes causes nausea.

Raw carrots and turnips pounded up in a mortar and taken to the extent of an ounce or two are often very effective.

Nuts, it will be noticed, are both lubricants because of the large amount of fat they contain, and irritants because of the indigestible refuse they leave.

Only so much of the above should be taken as is required to ensure an easy motion of the bowels every day. Some people are extraordinarily careless about their bowels and often go for two or three days without a motion; this state of things should never be permitted.

A noticeable feature of people on the Uric-Acid-Free Diet is the comparative odourless nature of their motions. Odourless motions mean less putrefaction, which is largely due to organisms in the large intestine. Metchnikoff claims that the presence or absence of putrefactive organisms in the large intestine is the chief factor that affects the duration of life. The fact that the Uric-Acid-Free Diet largely prevents putrefaction is another illustration of the "soil" being of more importance than the organism. When those on Uric-Acid-Free Diet have foul-smelling motions, it may be taken that an error is being made somewhere in their food.

It should be noted that the stools of those on the

Uric-Acid-Free Diet are naturally paler than when on ordinary mixed diet, especially when much milk food is consumed. This fact appears to worry beginners, but it is of no importance really.

Obesity is a knotty problem for many people, especially women about middle age. Some persons have adopted Diet for other reasons, and then found to their evident delight that besides obtaining better health they were becoming thinner as well; the improved circulation enables the fat to be burnt up in the body instead of being stored up as a waste product owing to defective combustion. In some cases it may be necessary to reduce weight by using ordinary mixed diet with little or no bread, sugar and fat, but giving a little fruit. Then when normal weight has been regained, make the change on to the appropriate form of Uric-Acid-Free Diet. Others do not like to try Diet for fear of getting fat on it, but it is quite possible to so modify Diet as to prevent it making a person fat. I have often found, when a person on Diet complains of getting fat, on going into the case, that large quantities of cream, butter, etc., were being consumed. The remedy in such cases is of course obvious.

If a person on Diet finds himself getting fat, the fluids must be restricted to not more than 1½ pints in the day and the quantity of cream, butter, oil and fats of every description should be limited to small amounts. If this is not sufficient to check the increase in weight, then the fat-free constituents of the Uric-Acid-Free Diet should be employed more extensively to the exclusion of those containing more fat. White of egg contains no fat, curd can be made from separated milk, skim-milk cheeses can be eaten, and skim milk drunk in place of whole milk. Dried separated milk can be added to dishes, etc., to increase the nourishment if there is difficulty in getting sufficient proteid. Toast and biscuits should be taken in preference to bread, but use rice in preference to any other cereal. Gluten can be conveniently used as a source of proteid; quite appetizing biscuits can be made of gluten and rice. If necessary, cut off all the breadstuffs, for their bulk and the flatulence that they may cause, help to increase the heart trouble and so tend to intensify the defective combustion which is the cause of the obesity. Plenty of fruit and vegetables may be taken so as to keep the bowels regular, but care must be taken to obtain sufficient proteid, as underfeeding cannot be tolerated in any form. Strange though it may seem, underfeeding itself may cause obesity, for underfeeding means a decrease in combustion, owing to diminished heart power, and therefore an increase of the waste products of defective combustion such as fat. It is therefore very inadvisable for those suffering from obesity to endeavour to get rid of their complaint by underfeeding.

Strict limitation of fluids is often of great help in cases of obesity, especially when the fat is due to heart weakness.

I am often asked to advise about exercise, and I always reply, take exercise in moderation, but be most careful to avoid fatigue. This is very important in cases of bad circulation when the heart is beginning to show signs of weakening, for fatigue will make the heart worse. Those who have actual weak hearts or a very defective circulation have often retarded their progress for months (maybe permanently), simply by taking too much exercise or by doing something that involved rather severer exertion than their condition warranted.

CHAPTER X

CONCLUSION

SUMMARY AND REMARKS

I HAVE divided the Conclusion into two parts, the first part consisting of a summary of most of the chief points mentioned in the book, and the second part of a few general observations and remarks.

Be absolutely certain that you are taking sufficient proteid. This is most important, as it is the foundation of everything.

Commence with Beginner's Diet.

Obey the Feeding Rules strictly.

The earlier in life that you change diet the better. To wait till disease has appeared before changing is in many cases to run grave risk of being too late.

Do not change diet without taking advice beforehand, for you may not be in a fit condition to stand the strain of the transition period.

Be careful not to confuse Diet in treatment of Disease with Diet in Health; they are two quite different matters.

Change diet slowly, by stages, taking about three months to complete the change.

The autumn or winter is the best time in which to change diet.

It is often advantageous to reduce fluids, especially during the transition stage.

Keep to the Diet strictly as long as you wish for good health.

Avoid exposure to cold, especially during the morning hours. Always be quite sure that you have got on sufficient clothing; this is very important in the case of children.

Do not go in for bracing up by climate or otherwise, it will lead to trouble later. There is no need for bracing up when on the Uric-Acid-Free Diet.

Avoid fruit in the morning before middle day and during cold weather.

Take a small quantity of salt every day.

Take plenty of fat, in the form of butter and oil.

Be careful about nuts until you are quite sure that you can digest them.

Be sparing in your use of cane sugar, especially if gouty or rheumatic, as it is very acid.

If subject to flatulence, take as little starch as possible, especially in the form of bread and cereal foods. Take what carbohydrate is required in the form of rice and potato.

The Uric-Acid-Free Diet undoubtedly conduces to improved health and increased strength and endurance, even in those who appeared comparatively healthy on ordinary mixed diet.

That meat is essential to keep up strength is a fallacy.

The modern standard of good health is a low one, and is lowered by those very "minor ailments" that the Uric-Acid-Free Diet prevents.

Uric acid is a poison for everybody, and its action on the body is much too important to be influenced to any appreciable extent by the personal factor. People who use the "One man's meat is another man's poison" argument either cannot or will not see the true significance of the facts.

If you wish for success carry out Diet faithfully to the very smallest particular for a sufficient length of time, and the improvement in your health will astound you. But it must be neck or nothing; do not compromise unless you are aiming for disaster. Weigh carefully in your mind whether the blessings of good health are worth the sacrifices demanded of you.

For some people Diet is impossible, for they are too diseased; you must be fit enough to be able to make the change.

Viewing the theory of uric acid, there is no ignoring the fact that the practice founded on these theories has been extraordinarily successful, not so much in this country where prejudice hampers its progress, but in the United States and abroad. This success has been achieved in spite of the somewhat unscrupulous methods employed by opponents in their endeavour to disprove the theory and destroy the treatment. In fact one may say that the practice has proved the theory to be substantially correct. The huge Battle Creek Sanatorium near Chicago may be claimed as one instance of the success of the Uric-Acid-Free treatment.

If critics would only make a practical trial of the Diet on their own persons for a sufficient length of time, instead of unfair criticisms based on ignorance or prejudice, one of the greatest steps towards generally improved health would have been taken. For instance one hears a man criticizing the Uric-Acid-Free Diet and the theories of uric acid, and, when asked, he confesses that he has never taken the trouble to even read Dr. Haig's book, *Uric Acid*.

Others, it is true, have given Diet a trial, both in themselves and in others, but some *essential* points have been misunderstood and accordingly have not been paid attention to, with the result, of course, that Diet is a failure. To attempt Diet in a half-hearted fashion under such conditions is waste of time and merely courting disaster.

The medical profession at present is inclined to attribute all disease to bacteria or bacilli of one kind or another, whereas in most cases were a little attention paid to the state of the circulation, many conditions now assigned to organisms would be found to be due to disordered circulation. Treat the circulation and pay no attention to the organism and the trouble will clear up.

After all, organisms depend on the soil and surroundings for their welfare and propagation, and, if rather more attention were paid to the improvement of the condition of the soil and less to the actual organisms themselves, many of the "bacteria-caused diseases" would disappear. This fact is well demonstrated by the fact that many diseases caused by organisms affecting the meat-eater cannot touch the uric-acid-free feeder, simply and solely because the soil in the latter case is unfavourable to the growth of organisms. For the organism is simply unable to exist in a free circulation, whereas the urate-laden tissues and the clogged and inefficient circulation of the meat-eater provide an excellent soil for the growth of organisms. The fact that one person will take a cold and another will not, although exposed to the same degree of infection, shows pretty clearly that there is another factor besides the micrococcus of catarrh to be considered in the causation of the common cold. That other factor—the condition of the soil—is of more importance than the micrococcus catarrhalis (*see* "Some Circulation Factors that Determine the Effects of Microbic Invasion," by A. Haig, M.D., in the *New York Medical Record*, September 1910; also "Gout of the Intestines," October 1912, in the same journal).

Pathological organisms are the fashionable fad of the moment, just as sour-milk treatment was a few years back. These fads are really like so many will-o'-the-wisps, leading nowhere and giving no results of permanent good, and finally landing one in a bog of useless bewilderment, created by the treatment of symptoms in place of causes.

Let me repeat, the action of uric acid in the body has been likened to the action of sand when put into the bearings of an engine. No one in his senses would dream of lubricating his motor with sand! Yet this is the treatment meted out to the human machine by everyone who pours uric acid into his body. Man takes twenty-five years to reach maturity, and this multiplied by 4 or 5 should give the natural span of life, 100-125 years. How many are there that live to anything like the full length of the allotted span? Can the failure to attain this age be wondered at when the "bearings are oiled with sand!!"

Mr. Rollo Russell's book, *Preventable Cancer*, gives overwhelming evidence to prove that the cancer death-rate is lowest in those parts of the world where the diet more nearly approaches the uric-acid-free standards; on the other hand the cancer death-rate is highest where high feeding is prevalent, especially where the consumption of meat, tea, beer, etc., is largest. A notable point is the comparative immunity from cancer enjoyed by small communities living in high cancer death-rate districts who do not follow the prevalent methods of high living. Surely it should be well worth while to adopt the Uric-Acid-Free Diet if only to avoid this dreaded scourge.

I do not claim Diet as a general panacea for all diseases. All I maintain is that a large number of diseases would not exist at all were everybody on Diet.

I cannot do better than conclude with Dr. Haig's observation that:—"The solubility of uric acid and its excretion, and the things that control it, cover a very much wider field than the mere answer to the question: What shall we eat or what shall we drink? It covers also the climate and situation of our house, the way in which it is warmed and ventilated, the water we drink, the temperature of the water we wash in, the clothing we wear by night and by day, and the bodily exercise we get and the way we get it." *

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* "Some Mistakes which may Prevent the Best Results of the Uric-Acid-Free Diet," by A. Haig, M.D. Bale, London.

APPENDIX I

SOME FUNDAMENTAL PRINCIPLES, AND HOW TO CALCULATE PROTEID REQUIREMENTS: TABLES OF PROTEID QUANTITIES

THE theories on which the Uric-Acid-Free Diet is founded and which have been proved by everyday practice to be absolutely sound are set forth at length in *Uric Acid*, 7th Ed. (J. & A. Churchill), and in this book I do not propose to do more than refer to them and that as little as possible, leaving those who require further information to look up the standard work. It is outside the scope of a practical book to discuss the theory of uric acid, the laws governing its excretion and retention, or its pathology.

The Uric-Acid-Free Diet is so called because it is an attempt to eliminate from ordinary mixed diet all those foodstuffs that have been proved by actual experiment on the human body to contain uric acid or its equivalents (xanthin, etc.). In order to avoid confusing people's minds, I may say in passing that the term "uric acid" is here used, not to define uric acid chemically, but as applying to the whole group of chemical substances so closely resembling uric acid in their action in the human body as to be physiologically one and the same; I refer to caffein, thein, theobromin, xanthin, hypoxanthin, etc. etc. The physiological reaction of the whole of these is identical with that of uric acid and they are all collectively referred to as "uric acid" for the purposes of this book. To obviate a maze of nomenclature, I may say that the many terms used by doctors, such as purin bodies, waste products, auto-intoxication, etc., may all be taken to mean one and the same thing—uric acid and the results produced in the body by uric acid.

There is of course no such thing as *absolute* freedom from uric acid; the term is only used in its *relative* sense. A certain amount of uric acid is produced as a waste product in the daily metabolism of the body; this, so-called, "endogenous" (*i.e.* originating within the body) uric acid the body can dispose of every day without harm, provided that nothing is permitted to interfere with the natural course of the elimination of the "endogenous" uric acid. But when a large quantity of, so-called, "exogenous" (*i.e.* originating outside the body) uric acid is introduced into the body in the food, the excretory processes are unable to deal with it and pass it out daily, with the result that uric acid is stored up in the body, thus injuring its structures and causing gout, rheumatism, the whole host of uric-acid diseases and eventually destruction. The theory that uric acid is a harmless by-product cannot hold water in face of the obvious facts.

The object of the Uric-Acid-Free Diet when adopted from birth is to prevent any storing up of uric acid in the body. In the case of a "healthy" adult just beginning Diet, the object of the Uric-Acid-Free Diet is twofold: (1) To clear out of his body the stores of uric acid already accumulated there with as little harm as possible to his constitution; (2) to prevent his accumulating any further stores of uric acid, once his old stores have been got rid of. The Uric-Acid-Free Diet as a treatment of disease is quite a different matter, and is dealt with elsewhere. (*See* ch. ix.).

Physiologists state that the day's food of a man must contain the following chemical compounds or *proximate principles* :—

1. Proteid (or albumen as it is sometimes called).

2. Fat.
3. Carbohydrate (sugars and starches).
4. Water.
5. Salts.

A healthy and suitable diet must possess the following characters:—

1. It must contain the proper amount and proportion of the various proximate principles.
2. It must be adapted to the age and weight of the individual, to the amount of work done by him, and to the climate.
3. The food must contain not only the necessary amount of proximate principles, but these must be present in a digestible form.

Experiment carried on for many years by many observers has decided that the right proportions of proteid, fat and carbohydrates are 1 each of proteid and fat to 2½ of carbohydrate.

Of the first three proximate principles by far the most important is proteid, for it is absolutely essential to life. The chief aim of all diets is to obtain sufficient proteid; the fat and carbohydrate are not nearly so important. To adapt the old proverb about the pence and the pounds, I always advise patients to "Look after the proteid, and the fat and carbohydrate will look after themselves." I do not mean to imply that fat and carbohydrate are not necessary, but that practically in the process of obtaining sufficient proteid, a sufficiency of fat and carbohydrate is obtained also. Whereas if a person's attention is devoted to obtaining a sufficiency of fat or carbohydrate, there is almost certain to be deficiency of proteid, which means eventual starvation and death. Without proteid life is impossible, for proteid is the only food principle able to make good the wear and tear of the daily metabolism; fat and carbohydrate cannot do this. Metabolism is used to express the sum total of the chemical exchanges that take place in living tissues (see p. 217).

One of the final products of the metabolism of proteid in the body is urea, which is excreted chiefly in the urine. The amount of urea excreted is an absolute guide to the amount of proteid that has been digested, absorbed and assimilated in the body, 3 grains of proteid forming 1 grain of urea. For each 35.5 grains of urea formed in the body, 1 grain of so-called "endogenous" uric acid is formed (*see* p. 191). For further details, see *Uric Acid* and *Diet and Food.*

This brings me to the definition of nourishment. In my experience by far the best and safest definition for dietetic purposes is that nourishment is synonymous with proteid. To say that a food is very nourishing, or contains a large amount of nourishment, is simply to say that the food is of high proteid value.

While on this subject I wish to draw attention to what is in my opinion a grave mistake, namely the modern tendency of Science to talk about the calorific (heat) value of foodstuffs, as well as of the proteid value. It is difficult enough to get the ordinary person, who is ignorant of physiology, to understand what is meant by the proteid value of any foodstuff, but to say that a food contains a certain percentage of proteid and also a certain number of calories (units of heat) is to make confusion worse confounded. When a layman, having learnt that the calorie is a unit of energy in the form of heat, reads that a certain food contains a large number of calories, he naturally thinks that it must *ipso facto* be very nourishing, so he straightway arranges his diet in accordance with the number of calories each foodstuff contains, and the result is starvation from lack of proteid. To take an example:—When such an investigator discovers that butter contains 8.6 calories to the gramme, and cheese 2.4 calories to the gramme, he concludes that butter must be nearly four times as nourishing as cheese. Again he finds that lean beef contains only .98 calories, so he thinks butter is eight times more nourishing than beef: a *reductio ad absurdum.* This, I grant, is an extreme case, but over and over again I have had patients talk similar nonsense. "Oh! I have been taking so-and-so because it contains such a large number of calories and must therefore be so very nourishing!!!!"

I always advise patients to take no account whatever of the calorific value of the different foodstuffs, as it only confuses them and may lead them into serious dietetic errors. The other day I had a patient who was arguing that whole-cream milk *must* be more nourishing than skim milk, because pure cream contains more calories than whole milk, and therefore, if the cream is removed, the skim milk must be valueless from the point of view of nourishment. I had great difficulty in persuading this patient that skim milk, far from being less nourishing than the whole milk, was actually more nourishing because of the removal of the comparatively useless fat.

In the same way as it is an error to talk of the calorific value of foods, so is it wrong to talk to ordinary people of fat and carbohydrate as nourishment.

For they get the idea that fat and carbohydrate are equal to proteid in nourishment, with the result that they take large quantities of foodstuffs rich in fat and carbohydrate, but poor in proteid, and accordingly underfeed, thus risking all the dangers entailed by such folly. To repeat what I have already said:—Proteid is *the* essential constituent of a diet (the derivation of the word "proteid" from the Greek πρῶτος meaning "first" emphasizes this), and the aim of all diets is to get sufficient proteid, leaving the rest to shift for themselves, for sufficient fat and carbohydrate will be consumed in the process of obtaining the requisite quantity of proteid: this is especially true of the natural diet of man, nuts and fruit. It is most unsafe to assume the converse of this, and say that sufficient proteid will be obtained in a diet containing requisite amounts of fat and carbohydrate. So the great rule is:—TAKE SUFFICIENT PROTEID. This cannot be insisted on too strongly, and must be my excuse for having referred to this matter at some length.

These facts place in our reach a very simple means of dealing with excess of fat in the body, namely to cut down the fats, sugars and starches, which are not essential to life, and continue the proteids, which are essential, in full. To diminish proteids under these conditions is to weaken the mechanism (the heart) of the body's metabolism, and thus to increase the fattening process rather than diminish it (*see* p. 182). It is of course quite impossible to live for any length of time on an absolute fat-free or carbohydrate-free diet, though it is difficult to find an exclusively proteid diet that is quite free from fat and carbohydrate.

The acidity, in ordinary usage, refers to the acidity of the urine. Normally the urine is acid owing to the presence of compounds of phosphoric acid. The acidity of the urine is increased by (1) certain foods, *e.g.* bread and the cereals which contain phosphoric acid; (2) cold which decreases the excretion (passing out) of acids by the skin; (3) excess of proteid food. The acidity is decreased by (1) certain foods, *e.g.* potato; (2) heat which increases the excretion of acids by the skin; (3) underfeeding.

The acidity of the urine is an index to the variations in the alkalinity of the blood. The less alkaline the blood the higher the acidity of the urine, and *vice versa*. The more alkaline the blood the more uric acid it can hold in solution; the less alkaline the blood the less uric acid is held in solution. Hence the excretion of uric acid in the urine varies inversely as the acidity. Therefore high acidity of the urine means retention of uric acid, and low acidity means increased excretion of uric acid.

Under normal conditions acidity is higher in the evening and lower in the morning, so that the greatest excretion of uric acid is in the morning.

Acidity, being practically synonymous with phosphoric acid, must not be confounded with uric acid, although uric acid itself, in common with other less important urinary acids, tends to raise the acidity of the urine slightly.

The first question that arises on any diet is, How much? This is by far the most important question, and one about which more misapprehension has arisen and more misstatements have been made than about almost any other.

It is stated in standard works on physiology that a man requires from 9-10.5 grs. of proteid for each pound of his body weight per day. This is the fundamental law governing the amount of proteid a person requires, no matter what the diet consists of, and on this law is founded the albumen requirements of a person beginning the Uric-Acid-Free Diet. I may here say that proteid and albumen are synonyms for each other and are one and the same thing, for some people do not seem to have grasped the fact that proteid and albumen are simply two names for the same substance.

For an ordinary sedentary life a person requires 9 grs. of proteid per lb. of body weight per day. For an active out-of-door life, such as that of an athlete or a navvy, from 10-11 grs. per lb. of body weight per day is required in proportion to the severity of the exertion involved.

The weight for the proteid calculation must be defined as the weight without clothes taken in the morning before taking bath or breakfast; I refer to this weight as a person's "net weight." With reference to stout elderly persons their weight must be considered as being, not what they actually weigh at the present time, but what they weighed at the age of 25, when they had reached full growth and had no excess of adipose tissue about them. With reference to young adults who are too fat the weight required is that taken before they became fat, or else some allowance must be made.

I will now give an illustration of how the physiological rule governing the daily proteid requirements works out in ordinary life. As an example I will take a young man of 25 leading an athletic life. I will suppose that he weighs 10 st. net, and that he has little or no fat about him. His weight expressed in pounds is 140, and multiplying this by 10.5, as he is leading a very active life, we find that his daily allowance of proteid is 1470 grs. So this young man requires to obtain 1470 grs. of proteid every day from the food that he eats in order to be healthy and remain so.

Now I will take this same man at the age of 50 leading a comparatively sedentary life; I will suppose that his net weight is 12 st. What are his proteid requirements now? Two factors now modify the amount of proteid he requires. (1) The change from an active life to a sedentary one; (2) the increase of 2 st. in weight. With reference to (1), the change in his method of life necessitates his net weight being multiplied by 9 instead of 10.5. As regards (2), at 25 a man reaches full growth and development, so that any excess of weight in later years above his weight at 25 must be taken to be due to adipose tissue or fat; now fat does not require albumen to nourish it, as it is merely a storing up of waste tissue in the body: thus although this man weighs 12 st. he now only requires proteid sufficient to nourish his original 10 st. Hence in order to arrive at the proteid allowance for this 12-st. man of 50, we must take his net weight at 25, namely 10 st., bring it to lbs. 140, and multiply this by 9, which gives 1260 grs. as his proteid allowance. So the final result is that this 12-st. man, aged 50, actually requires less proteid than he did at the age of

25, when weighing only 10 st. The reasons for this are shown above, namely his extra 2 st. of weight are merely due to fat and therefore negligible from the proteid allowance point of view, and he is leading a sedentary life instead of an active one.

In order to assist people to find out how much proteid they should take during the day in order not to underfeed, I give below two tables of weights, with the corresponding number of grains of proteid opposite each weight. The first table is worked out for those leading an active life, and the second table for those leading a sedentary life. The weight taken is of course the "net" weight, *i.e.* that without clothes and excess of fat, if present.

DAILY PROTEID ALLOWANCE FOR AN ADULT LEADING AN ACTIVE LIFE

An Adult	weighing	7	st. or	98	lbs. will	require a daily allowance of	980	grs. of proteid
Do.	do.	7½	do.	105	do.	do.	1050	do.
Do.	do.	8	do.	112	do.	do.	1120	do.
Do.	do.	8½	do.	119	do.	do.	1190	do.
Do.	do.	9	do.	126	do.	do.	1260	do.
Do.	do.	9½	do.	133	do.	do.	1330	do.
Do.	do.	10	do.	140	do.	do.	1400	do.
Do.	do.	10½	do.	147	do.	do.	1470	do.
Do.	do.	11	do.	154	do.	do.	1540	do.
Do.	do.	11½	do.	161	do.	do.	1610	do.
Do.	do.	12	do.	168	do.	do.	1680	do.
Do.	do.	12½	do.	175	do.	do.	1750	do.
Do.	do.	13	do.	182	do.	do.	1820	do.

DAILY PROTEID ALLOWANCE FOR AN ADULT LEADING A SEDENTARY LIFE

An Adult	weighing	7	st. or	98	lbs. will	require a daily allowance of	882	grs. of proteid
Do.	do.	7½	do.	105	do.	do.	954	do.
Do.	do.	8	do.	112	do.	do.	1008	do.
Do.	do.	8½	do.	119	do.	do.	1071	do.
Do.	do.	9	do.	126	do.	do.	1134	do.

An Adult	weighing	9½	st. or	133	lbs.	will require a daily allowance of	1197	grs. of proteid
Do.	do.	10	do.	140	do.	do.	1260	do.
Do.	do.	10½	do.	147	do.	do.	1323	do.
Do.	do.	11	do.	154	do.	do.	1386	do.
Do.	do.	11½	do.	161	do.	do.	1449	do.
Do.	do.	12	do.	168	do.	do.	1512	do.
Do.	do.	12½	do.	175	do.	do.	1575	do.
Do.	do.	13	do.	182	do.	do.	1638	do.

Having given in the above tables the daily proteid requirements, I will now show how a person, knowing his individual requirements from these tables, can divide his allotted number of grains, which may convey nothing to his mind, into the usual three meals of the day.

I will take as an example a person leading an active life whose weight without clothes or excess of adipose is 9 st. On looking at the first table we see that this person's daily proteid requirements are 1260 grains, which can be divided into three uric-acid-free meals as follows:—

Breakfast.	grs. of proteid
3 oz. of wheatmeal porridge . .	68
1 oz. rusk and butter . . .	34
½ pint of milk	131
	233

Lunch.	
Cheese omelette, made of ½ oz. cheese and 3 whites of egg . . .	250
4 oz. potato, 1 oz. vegetable . .	40
Curd made from 1 pint of milk . .	230
2 oz. fruit	16
¼ pint of milk	65
	601

Dinner.	grs. of proteid
2 whites of egg with spinach	120
3 oz. stuffed tomatoes	32
2 oz. potato	16
1 almond cup pudding	117
1 oz. fruit	8
½ pint of milk	131
	424

Total proteid for the day = 1260 grs.

This day's food has been taken from those given in Appendix II., where references to the cookery books from which some of the dishes have been taken will be found.

If a person is not quite certain as to what weight he should take, on which to found his daily proteid quantity, let him take an approximate weight and feed up to the proteid quantity required for that weight. In cases like this a careful watch should be kept on the blood colour by means of the colour card (obtainable of John Bale, Sons & Danielsson). If the blood colour does not improve decidedly after a few months on Diet, then the patient is very likely underfeeding, and should increase his proteid allowance by an extra hundred grains or so and watch the effect on the blood colour, which, if the non-improvement is due to underfeeding, will quickly improve. Another most useful guide, and at the same time a more accurate one, would be for the patient to have his excretion of urea estimated (*see* p. 60) while still on his ordinary diet. This of course would not be reliable if the patient were obviously underfeeding or overfeeding on ordinary diet.

During the early days on Diet there may be a decrease in the blood colour, even when a patient is feeding up to his full proteid quantity and digesting it. This is due not to too little proteid but to too great excess of uric acid being brought into the blood in the process of clearing the old stores of uric acid out of the body, this being caused by the higher alkalinity of the Uric-Acid-Free Diet when compared to ordinary mixed diet. The different Stages in changing Diet should accordingly be carried out more slowly so as to counteract such tendencies (*see* p. 63).

APPENDIX II

SPECIMEN DAY'S FOOD WORKED OUT IN MEALS

THESE Diets are calculated (1) for a sedentary person, 25 years of age, whose "net" weight (*i.e.*, bone and muscle only, not fat) is 10 st. (140 lbs.); and (2) for an active person of the same age whose "net" weight is 9 st. (126 lbs.). In other words an active person weighing 9 st. requires as much proteid as a sedentary person weighing 10 st. By the Tables in Appendix I. (p. 198) the daily proteid allowance for either of these persons is 1260 grs.

Active persons weighing more or less than 9 st. easily can calculate how much extra food they must add to, or subtract from, the Diets given here, by allowing 10 grs. of proteid for each pound that they are above or below 9 st. Similarly sedentary persons must allow 9 grs. of proteid for each pound that they are above or below 10 st. Thus, for instance, a sedentary person, weighing 12 st., will require to add 28 × 9 = 252 grs. of proteid to these Diets. Likewise an active person weighing 8 st. must deduct 14 × 10 = 140 grs. of proteid from these quantities. Therefore the 12-st. sedentary person should add extra food to the value of 252 grs. of proteid—say, 1 oz. of cheese (140), and two whites of egg (120)—to any of the Diets in order to obtain sufficient proteid for his weight. In the same way the 8-st. active person, taking Diet 5, should have the Welsh rarebit at lunch made of 1 oz. of cheese (140) in place of the 2 oz. of cheese put down in the Diet, or if he prefers to omit any other foods of equivalent proteid value he of course may do so.

The object of putting different headings, *e.g.* "No Cheese," to the day's Diet is twofold: (1) To give a person, who, for some reason or other, is unable to take, say, cheese, an idea of what a day's food can consist of without cheese; (2) to show patients how to introduce a little variety into the Uric-Acid-Free Diet. Diet No. 9 is given chiefly for the first reason, and is not to be recommended, as its bulk is rather more than the ordinary person can manage, especially after having been used to the comparatively small bulk of Meat Diet.

"A" refers to recipes in the *Apsley Cookery Book*, by Mrs. J. J. Webster & Mrs. F. W. Jessop, price 3/6; J. & A. Churchill, 7, Great Marlborough Street, W.

"N.C." refers to *Some Recipes for the Uric-Acid-Free Diet*, by Mrs. G. M. Haig, price 6d.; John Bale, Sons & Danielsson, Ltd., Great Titchfield Street, W. The method of making curd is given here.

A heaped tablespoonful of the cooked Cereal Foods mentioned below is, approximately, the equivalent of one ounce of bread in proteid value.

1. Beginner's Diet

	grs.	
Breakfast.		
2 whites of egg	136	
3 oz. potato	24	
1 oz. toast	34	
¼ pint of milk	65	
		259
Lunch.		
2 whites of egg	136	
4 oz. potato and vegetable	32	
Carry forward,		259

	grs.	
Brought forward,		259
Curd of 1 pint of milk	230	
3 oz. fruit	24	
½ pint of milk, with	131	
½ oz. of dried milk stirred into it	70	623
Dinner.		
2 oz. rice pudding	68	
Curd of 1 pint of milk	230	
3 oz. fruit	24	
¼ pint of milk	65	387
		1269

2. SMALL AMOUNT OF BREAD

Breakfast.		
2 oz. hominy porridge (A. 447)	68	
2 oz. scones	68	
¼ pint Postum (half milk)	32	168
Lunch.		
Curd of 1 pint of milk (3 oz.)	230	
4 whites of egg as an omelette (N.C.)	240	
2 oz. potato	16	
2 oz. fruit	16	
½ pint of milk	131	633
Dinner.		
½ oz. cheese as cheese fritters (A. 64)	63	
3 oz. potato, 1 oz. vegetable	32	
Curd of 1 pint of milk	230	
Carry forward,		801

	grs.	
Brought forward		801
2 oz. fruit	16	
½ pint of milk	131	
		472
		1267

3. ORDINARY

Breakfast.

3 oz. semolina and cheese pudding (A. 134)	141	
2 oz. scone and butter	68	
¼ pint milk	65	
		274

Lunch.

½ oz. nuts	34	
2 whites of egg as soufflé (N.C.)	120	
4 oz. potato, 1 oz. vegetable	40	
3 oz. bread	102	
Curd of ½ pint of milk	115	
3 oz. fruit	24	
½ pint milk	131	
		566

Dinner.

2 oz. rice cutlets (A. 132)	68	
4 oz. potato, 1 oz. vegetable	40	
2 whites of egg as meringue	120	
Curd of ½ pint of milk	115	
2 oz. fruit	16	
¼ pint milk	65	
		424
		1260

4. Ordinary

	grs.	
Breakfast.		
3 oz. porridge (made of wheatmeal)	68	
1 oz. rusk and butter	34	
½ pint milk	131	
		233
Lunch.		
Cheese omelette, made of ½ oz. cheese and 3 whites of egg (A. 65)	250	
4 oz. potato, 1 oz. vegetable	40	
Curd of 1 pint of milk	230	
2 oz. fruit	16	
¼ pint milk	65	
		601
Dinner.		
2 whites of egg with spinach (A. 137)	120	
3 oz. stuffed tomatoes (A. 141)	32	
2 oz. potato	16	
1 almond cup pudding (A. 342)	117	
1 oz. fruit	8	
½ pint milk	131	
		424
		1258

5. No Curd (1)

Breakfast.		
2 whites of egg scrambled on 1 oz. of toast (N.C.)	154	
2 oz. toast and butter	68	
¼ pint of milk	65	
		287
Carry forward,		287

	grs.	
Brought forward,		287
Lunch.		
2 oz. cheese as Welsh rarebit on 1½ oz. toast (A. 66)	331	
3 oz. potato, 1 oz. vegetable	32	
2 oz. sago milk pudding	68	
2 oz. fruit	16	
½ pint of milk	131	
		578
Dinner.		
2 oz. macaroni Neapolitan (A. 95)	68	
¼ pint of milk	65	
2 Brazil-nut cutlets (A. 350)	126	
4 oz. potato, 1 oz. vegetable	40	
1 oz. bread or toast	34	
4 oz. fruit	32	
1½ oz. boiled rice	34	
		399
		1264

6. No Curd (2)

Breakfast.		
2 oz. macaroni savoury (A. 96)	68	
2 oz. toast and butter	68	
¼ pint of milk	65	
		201
Lunch.		
2 oz. cheese as balls made with 2 whites of egg (A. 60)	400	
3 oz. potato, 1 oz. vegetable	32	
2 oz. bread	68	
2 oz. fruit	16	
½ pint milk with 1 white of egg (A. 103)	191	
		707
Carry forward,		908

	grs.	
Brought forward,		908
Dinner.		
1 quarter of rice and nut rissoles (A. 377)	200	
4 oz. potato, 1 oz. vegetable	40	
2 oz. Valentia pudding (A. 332)	68	
2 oz. fruit	16	
1 oz. bread	34	
		358
		1266

7. No Curd (3)

Breakfast.		
3 oz. savoury rissoles (A. 125)	114	
2 oz. toast	68	
¼ pint of milk	65	
		247
Lunch.		
2 oz. cheese curried on 2 oz. toast (N.C., p. 4)	348	
1 oz. bread	34	
4 oz. potato, 1 oz. vegetable	40	
2 oz. chestnut cream (A. 352)	68	
1 oz. fruit	8	
½ oz. nuts	34	
½ pint of milk	131	
		663
Dinner.		
2 oz. rice à la Mexicaine (N.C., p. 3)	34	
1 oz. potato	8	
2 whites of egg as Charlotte Russe (A. 234)	251	
¼ pint of milk	65	
		358
		1268

8. No Curd (4)

	grs.	
Breakfast.		
3 oz. savoury pudding (A. 131)	138	
1 oz. toast	34	
¼ pint of milk	65	
		237
Lunch.		
½ oz. cheese	70	
2 oz. bread	68	
4 whites of egg scalloped (N.C.)	240	
3 oz. potato, 1 oz. vegetable	32	
3 oz. milk rice pudding	102	
¼ pint of milk	65	
2 oz. fruit	16	
		593
Dinner.		
3 oz. savoury cheese cakes (A. 129)	150	
3 oz. potato, 1 oz. vegetable	32	
2 oz. toast and butter	68	
1 oz. chestnuts	34	
2 oz. fruit	16	
½ pint of milk	131	
		431
		1261

9. No Milk, no Egg, no Curd

Breakfast.		
2 oz. rissoto (A. 126)	68	
2 oz. toast	68	
¼ pint of Postum	—	
		136
Carry forward,		136

	grs.	
Brought forward,		136
Lunch.		
1 oz. nuts	68	
4 oz. macaroni cheese	136	
6 oz. potato and vegetable	48	
1 oz. cheese	140	
2 oz. bread	68	
2 oz. fig pudding (A. 248)	68	
2 oz. fruit	16	
		544
Dinner.		
3 oz. rice and cheese (A. 120)	300	
6 oz. potato and vegetable	48	
1 oz. nuts	68	
4 oz. bread	136	
4 oz. fruit	32	
		584
		1264

10. No Curd, no Milk

Breakfast.		
2 whites of egg poached on 1 oz. toast (N.C.)	154	
1 oz. toast or biscuit and butter	34	
		188
Lunch.		
2 oz. cheese, German dish (A. 59)	312	
2 oz. rice and tomatoes (A. 124)	68	
4 oz. potato and vegetable	32	
1 oz. bread	34	
2 oz. date pudding (A. 245)	68	
		514
Carry forward,		702

	grs.	
Brought forward,		702
Dinner.		
4 whites of egg as omelette with tomatoes, (N.C.)	240	
1 oz. cheese	140	
4 oz. bread or toast	136	
5 oz. fruit	40	
		556
		1258

II. No Cheese (1)

Breakfast.		
2 whites of egg baked inside 2 tomatoes (N.C.)	144	
2 oz. toast and butter	68	
¼ pint of milk	65	
		277
Lunch.		
2 whites of egg in Ramequin cases (N.C.)	120	
4 oz. potato and vegetable	32	
Curd of a pint of milk	230	
4 oz. fruit	32	
½ pint of milk	131	
		545
Dinner.		
2 whites of egg, curried (N.C.)	120	
Curd of 1 pint of milk	230	
4 oz. fruit	32	
¼ pint of milk	65	
		447
		1269

12. No Cheese (2)

	grs.	
Breakfast.		
2 whites of egg, fried (N.C.)	120	
2 oz. toast	68	
¼ pint of milk	65	
		253
Lunch.		
Curd of 1 pint of milk with cream	230	
4 oz. fruit	32	
4 oz. potato, 2 oz. vegetable	48	
1 oz. nuts	68	
2 oz. toast	68	
½ pint of milk	131	
		577
Dinner.		
2 whites of egg baked inside baked potatoes, 3 oz. potatoes (N.C.)	144	
2 oz. vegetable	16	
2 oz. toast	68	
Curd of ½ pint of milk	115	
3 oz. fruit	24	
¼ pint of milk	65	
		432
		1262

13. No Cheese, no Milk

Breakfast.		
2 whites of egg fried in batter made of 1 white of egg (N.C.)	180	
2 oz. toast	68	
		248
Carry forward,		248

	grs.	
Brought forward, .		248
Lunch.		
4 whites of egg scalloped with ½ oz. pounded nuts	274	
4 oz. potato, 2 oz. vegetable . .	48	
Curd of 1 pint of milk, flavoured with ginger	230	
4 oz. fruit	32	
1 oz. nuts	68	
	——	652
Dinner.		
Curd of 1 pint of milk, flavoured with nutmeg	230	
4 oz. fruit	32	
3 oz. German pudding (A. 251) . .	102	
	——	364
		1264

14. Cheap Diet

Breakfast.		
4 oz. bread or toast	136	
½ pint of milk (or 1 oz. dried separated milk)	131	
	——	267
Lunch.		
1 oz. cheese	140	
8 oz. bread and biscuit . . .	272	
8 oz. potato and vegetable . .	64	
6 oz. fruit	48	
¼ pint of milk (or ½ oz. dried separated milk)	65	
	——	589
Carry forward, .		856

	grs.	
Brought forward,		856
Dinner.		
1 oz. cheese	140	
4 oz. bread or toast	136	
4 oz. potato and vegetable	32	
4 oz. fruit	32	
¼ pint of milk (or ½ oz. dried separated milk)	65	
		405
		1261

15. SMALL BULK

Breakfast.		
2 whites of egg poached on 1 oz. toast (N.C.)	154	
¼ pint of milk (or 1 oz. dried separated milk)	65	
		219
Lunch.		
2 oz. toasted cheese with chutney	280	
2 oz. potato, 1 oz. vegetable	24	
Curd of 1 pint of milk	230	
2 oz. fruit	16	
½ pint of milk (or 1 oz. dried separated milk)	131	
		681
Dinner.		
2 whites of egg scrambled (N.C.)	120	
Curd of 1 pint of milk, flavoured with vanilla	230	
2 oz. fruit	16	
		366
		1266

TWO MEALS A DAY

16. No Curd

First Meal—11 *a.m.*	grs.	
4 whites of egg scrambled with pickled walnut (N.C.)	240	
1 oz. cheese	140	
4 oz. bread	136	
6 oz. fruit	48	
1 oz. dried milk (separated) made into a thick paste with a little water or milk	140	
½ pint of milk	131	
		835

Second Meal—6 *p.m.*		
1 oz. nuts	68	
5 oz. potato and vegetable	40	
Cream made from ½ oz. dried separated milk	70	
6 oz. fruit	48	
½ pint milk thickened with ½ oz. dried separated milk	201	
		427
		1262

17. No Egg

First Meal—11 *a.m.*	
4 oz. vermicelli cheese	136
4 oz. potato and 3 oz. vegetable	56
Curd of 1 pint of milk	230
3 oz. nut and fruit pudding (A. 370)	102

	grs.	
½ oz. cheese	70	
2 oz. biscuit	68	
½ pint of milk	131	
		793
Second Meal—6 p.m.		
2 oz. devilled cheese (A. 61)	280	
4 oz. potato	32	
½ pint milk as junket	131	
4 oz. fruit	32	
		475
		1268

For the purposes of comparison with the other Diets given here, I append the "Ideal Diet," which has been worked out for the same weights.

The Ideal Diet

	grs.
9 oz. nuts	612
16 oz. dried fruit	256
50 oz. fresh fruit	400

1268 grs. of proteid.

GLOSSARY

IT has been suggested to me that there are several words used in this book, the meaning of which might not be quite grasped by my non-scientific readers, so I here define a few in the sense in which they are used in this book.

Physiology, from the Greek, φύσις, nature, + λογος, discourse, is the science which treats of the functions of the living human organism and its parts in the natural state as opposed to the diseased state.

Pathology, from the Greek, πάθος, disease, + λογος, discourse, is the science which treats of human diseases, their nature, causes, progress, symptoms, etc.

Metabolism, from the Greek, μεταβολή, change, is the process by which (1) living tissues or cells take up and convert into their own proper substance the nutritive material brought to them by the blood, or by which (2) they transform their cell material into simpler substances which are fitted either for excretion or for some special purpose, as in the manufacture of digestive ferments. Metabolism may be either constructive or destructive.

Proteid, from the Greek, πϱῶτος, first, is the chief essential constituent of food, and the only one capable of building up the tissues of the body and of repairing the waste due to daily wear and tear.

Urea, from the Greek, ὖρον, urine, is the chief end-product of the breaking down of proteids by the metabolism of the body. It is excreted in the urine, and the amount passed during the 24 hours is indicative of the state of a person's nutrition, and bears a definite ratio to his weight and to the amount of proteid digested. Within normal limits a rise of urea indicates improving nutrition and a fall failing nutrition. Exercise augments the breaking down of proteids in the body, thus causing an increased excretion of urea (see *Uric Acid*, pp. 341-346; and *Diet and Food*, p. 37).

Collæmia, from the Greek, κόλλα, glue, + αἷμα, blood, is excess of uric acid in the blood above that met with in physiological conditions. Uric acid in solution is a glue-like viscous fluid, so it can be understood how such a solution impedes the circulation of the blood, especially through the smaller vessels.

Retention, from the Latin, *re*, back, + *teneo*, I hold, is the opposite of collæmia and may be defined as the clearance of uric acid out of the blood by cold, acids, etc., with consequent storing up of it in the liver and other tissues of the body.

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